## Case 21-01020-dd Doc 1 Filed 04/12/21 Entered 04/12/21 15:14:44 Desc Main Document Page 1 of 73

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF SOUTH CAROLINA	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

### Official Form 101

### Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	1: Identify Yourself						
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):			
1.	Your full name						
	Write the name that is on your government-issued picture identification (for example, your driver's	Lavona First name Charlene	,-	First name			
	license or passport).	Middle name	-	Middle name			
	Bring your picture identification to your meeting with the trustee.	Mitchell Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)			
2.	All other names you have used in the last 8 years	Lavona C Mitchell					
	Include your married or maiden names.	Lavona Mitchell					
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9805					

Debtor 1 Lavona Charlene Mitchell Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	□ I have not used any business name or EINs.  DBA Simply Tasteful FDBA Geechie Grub, LLC  Business name(s)  EIN	☐ I have not used any business name or EINs.  Business name(s)  EIN
5.	Where you live	1908 Alton St. Charleston, SC 29406 Number, Street, City, State & ZIP Code Charleston County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code	If Debtor 2 lives at a different address:  Number, Street, City, State & ZIP Code  County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1	Lavona Charlene Mitchell	Document	Case number (if known)
		Document	raye 3 01 73

	t 2: Tell the Court About	. oui L	Janki upicy Ca	36					
7.	The chapter of the Bankruptcy Code you are						or Bankruptcy		
	choosing to file under	Chapter 7							
			Chapter 11						
			Chapter 12						
			Chapter 13						
			·						
3.	How you will pay the fee		Chapter 12 Chapter 13  I will pay the entire fee when I file my petition. Please check with the clerk's office about how you may pay. Typically, if you are paying the fee yourself, you may pay with order. If your attorney is submitting your payment on your behalf, your attorney may a pre-printed address.  I need to pay the fee in installments. If you choose this option, sign and attach the The Filing Fee in Installments (Official Form 103A).  I request that my fee be waived (You may request this option only if you are filing for but is not required to, waive your fee, and may do so only if your income is less than applies to your family size and you are unable to pay the fee in installments). If you center the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file.  No.  Yes.  District  When  Case not Case not District  When  Case not Case not Debtor  District  When  Case not Case		yourself, you may pay with cash, cashier's	check, or money			
						tion, sign and attach the Application for Indi	ividuals to Pay		
			I request that but is not req	t my fee be wai uired to, waive y	ved (You may request this optour fee, and may do so only if	your income is less than 150% of the officia	I poverty line that		
).	Have you filed for bankruptcy within the	■ N							
	last 8 years?	ЦΥ							
				-	<del></del>				
			DISTRICT		when	Case number			
10.	Are any bankruptcy	■ N	0						
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an	□ Y	es.						
	affiliate?		Debtor			Relationship to you			
					When	Case number, if known			
						Relationship to you			
					When	Case number, if known			
11.	Do you rent your residence?	■ N	o. Go to I	ine 12.					
		☐ Y	es. Has yo	ur landlord obtai	ned an eviction judgment again	nst you?			
				No. Go to line 1	2.				
						n Judgment Against You (Form 101A) and f	ile it as part of		

Case 21-01020-dd Doc 1 Filed 04/12/21 Entered 04/12/21 15:14:44 Desc Main Document Page 4 of 73 Debtor 1 Lavona Charlene Mitchell Case number (if known) Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time ■ No. Go to Part 4. business? Name and location of business Yes. A sole proprietorship is a business you operate as Geechie Grub, LLC. an individual, and is not a Name of business, if any separate legal entity such as a corporation, partnership, or LLC 1908 Alton St. If you have more than one Charleston, SC 29406 sole proprietorship, use a Number, Street, City, State & ZIP Code separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to Chapter 11 of the proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, Bankruptcy Code, and are you a small business cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. debtor or a debtor as § 1116(1)(B). defined by 11 U.S.C. § 1182(1)? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). ☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I ☐ Yes. choose to proceed under Subchapter V of Chapter 11. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention Do you own or have any No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own

Number, Street, City, State & Zip Code

Where is the property?

perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Debtor 1 Lavona Charlene Mitchell

Case number (if known)

Part 5:

**Explain Your Efforts to Receive a Briefing About Credit Counseling** 

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1 Lavona Charlene	Mitchell		Case num	ber (if known)			
Par	t 6: Answer These Quest	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.			efined in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.						
			☐ No. Go to line 16c.					
			No. Go to line 16c.   Yes. Go to line 17.   State the type of debts you owe that are not consumer debts or business debts   No. I am not filing under Chapter 7. Go to line 18.  Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?  No. Yes  No. Yes  1-49					
		16c.	State the type of debts you	owe that are not consumer debts or busin	ess debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7 are paid that funds will be a	. Do you estimate that after any exempt pravailable to distribute to unsecured creditor	operty is excluded and administrative expenses rs?			
	16c. State the type of debts you owe that are not consumer debts or business delegation of the type of debts you owe that are not consumer debts or business delegation.  7. Are you filing under Chapter 7. Go to line 18.  Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?  8. How many Creditors do you estimate that you owe?  1.49  50-99  100-199  100-199  100-199  200-999  9. How much do you estimate your assets to be worth?  1.49  50,001 - \$100,000  \$10,0001 - \$10 million  \$50,001 - \$100,000  \$50,001 - \$100,000  \$50,001 - \$100,000  \$50,001 - \$100,000  \$50,0001 - \$100,000  \$50,0001 - \$100,000  \$50,0001 - \$100,000  \$50,0001 - \$100,000  \$50,0001 - \$100,000  \$50,0001 - \$100,000  \$50,0001 - \$100,000  \$50,0001 - \$500,000  \$50,0001 - \$100,000  \$50,0001 - \$100,000  \$50,0001 - \$100,000  \$50,0001 - \$100,000  \$50,0001 - \$100,000  \$50,0001 - \$100,000  \$50,0001 - \$100,000  \$50,0001 - \$100,000  \$50,0001 - \$100 million  \$50,0001 - \$100,000  \$50,0001 - \$100,000  \$50,0001 - \$500 million  \$500,001 - \$500,000  \$500,0001 - \$500 million  \$500,0001 - \$100 million  \$500,0001 - \$1							
			□Yes	1,000-5,000				
		indivídual primarily for a personal, family, or household purpose."    No. Go to line 16b.   Yes. Go to line 17.						
18.	How many Creditors do	<b>1</b> 1 10		□ 1.000-5.000	□ 25.001-50.000			
			)					
	owe:			□ 10,001-25,000	☐ More than100,000			
19.		<b>\$</b> 0 - \$	550,000					
20.		□ \$0 - \$	550,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
		\$50,0	)01 - \$100,000		□ \$1,000,000,001 - \$10 billion			
				_ , , ,	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion			
Par	t7: Sign Below							
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
					not an attorney to help me fill out this			
		I request	relief in accordance with the	chapter of title 11, United States Code, sp	pecified in this petition.			
		bankrupt and 357	ccy case can result in fines up 1.					
	Are you filing under Chapter 7?  Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?  How many Creditors do you estimate that you owe?  How much do you estimate your assets to be worth?  How much do you estimate your liabilities to be?  7: Sign Below  you	Lavona	Charlene Mitchell	Signature of Deb	otor 2			
		Executed	d on Anril 12 2021	Executed on				
		_,,500,00			IM / DD / YYYY			

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Debtor 1 Lavona Charlene Mitchell Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

	th R. Heilig Attorney for Debtor	Date	April 12, 2021 MM / DD / YYYY
Elizabeth I	R. Heilig 10704		
Meredith L	aw Firm, LLC		
4000 Fabe Suite 120	r Place Drive		
North Cha	rleston, SC 29405		
Number, Street,	City, State & ZIP Code		
Contact phone	843-529-9000	Email address	eheilig@meredithlawfirm.com
10704 SC			
Bar number & St	tate		

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Fill in this infor	mation to identify your	case:		
Debtor 1	Lavona Charlene	Mitchell		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF SOUTH (	CAROLINA	
Case number				_ 0
(if known)				☐ Check if this is an
				amended filing

#### Official Form 106Sum

#### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	40,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	8,937.31
	1c. Copy line 63, Total of all property on Schedule A/B	\$	48,937.31
Par	t 2: Summarize Your Liabilities		
			<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	19,642.57
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	23,994.81
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	44,052.66
	Your total liabilities	\$	87,690.04
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,123.65
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,387.76
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sch	nedules.
7.	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Lavona Charlene Mitchell Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_1,503.32

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	nim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	23,994.81
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	18,360.00
<ol> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)</li> </ol>	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	42,354.81

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Fill	n this inforn	nation to identify yo	our case and th	nis filing	g:				
Deb	tor 1	Lavona Charle	no Mitchell						
DCD	101 1	First Name		e Name		Last Name			
Deb	tor 2								
Spou	se, if filing)	First Name	Middle	e Name		Last Name			
Jnite	ed States Bar	nkruptcy Court for the	e: DISTRICT	OF SOL	JTH CAROLII	NA			
						· · ·			
Case	e number _					_			Check if this is an
									amended filing
∕tt	icial Ea	rm 106A/B							
3C	hedul	e A/B: Pro	perty						12/15
eac	h category, se	eparately list and desc	ribe items. List	an asset	only once. If	an asset fits in more than on	e category, list the a	sset in the	category where you
ink	it fits best. Be	e as complete and acc	urate as possibl	le. If two	married peopl	e are filing together, both are	e equally responsible	for suppl	ying correct
						e top of any additional page			
nsw	er every ques	tion.	•			. , ,			, ,
art	1: Describe	Each Residence, Build	ding, Land, or Ot	her Real	Estate You Ov	wn or Have an Interest In			
Do	vou own or h	ave any legal or equit	able interest in a	anv resid	lence huilding	, land, or similar property?			
Ъ	you own or n	lave any legal of equit	able iliterest ili a	illy lesiu	lerice, building	, latiu, or sillillar property:			
	No. Go to Part	2.							
	Yes. Where is	a tha area arts O							
_	res. where is	s the property?							
4				\A/la a4	ia tha muamant	Observational Albert Servation			
.1	4000 Alton	. 64		vvnat	is the propert	y? Check all that apply			
	1908 Altor	if available, or other descrip	tion		Single-family	home			or exemptions. Put
	Street address, i	ii avaliable, or other descrip	MOII		Duplex or mu	lti-unit building			aims on Schedule D: Secured by Property.
					Condominium	or cooperative			
				_	Manufactura	l ar mahila hama			
	01 1 1			Ц		for mobile home	Current value of t	the C	Surrent value of the
	Charlesto	n SC 2	29406-0000		Land		entire property?	р	ortion you own?
	City	State	ZIP Code		Investment pr	roperty	\$80,000	).00	\$40,000.00
					Timeshare		Describe the natu	ire of vour	ownership interest
					Other		(such as fee simp	ole, tenanc	y by the entireties, o
				Who	has an interes	t in the property? Check one	a life estate), if kr	iown.	
					Debtor 1 only		Joint tenant		
	Charlesto	n			Debtor 2 only				
	County				Debtor 1 and	Debtor 2 only			
					At least one of	of the debtors and another	Check if this		nity property
				Othe		ou wish to add about this ite	(	"	
					erty identificati		on, caon ao toda		
					S#472-16-00				
						i-oso d her sister, Damitria N	Nitaball inharitas	l thic ho	ma fram thair
						2007. The debtor is inf			
						ty they could receive a			
					ent housing		approximately we	,0,000, 1	asca on the
						nt Value \$89,400.00			
						ii. ¥aiu∈ ψυ∋,≒υυ.υυ			
				(IVO	Lien)				
						from Part 1, including an			£40 000 00
									\$40,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Doc 1 Page 11 of 73 Document **Lavona Charlene Mitchell** Case number (if known) Debtor 1 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Yes Do not deduct secured claims or exemptions. Put Infinity Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: G Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2007 Year: Debtor 2 only Current value of the Current value of the 168,800 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another VIN: JNKBV61E17M718259 \$2,200.00 \$2,200.00 (No Lien) ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$2,200,00 .pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... **Kitchenware** Stove Refrigerator **Washing Machine** Dryer Living Room Furniture **Bedroom Furniture Dining Room Furniture** \$2,840.00 **Work Tools** 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe..... 3 Televisions (\$350) Stereo (\$30) \$530.00 Computer (\$150) 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ☐ No

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Official Form 106A/B Schedule A/B: Property page 2

Yes. Describe.....

Case 21-01020-dd

Case 21-01020-dd Doc 1 Filed 04/12/21 Entered 04/12/21 15:14:44 Page 12 of 73 Document Lavona Charlene Mitchell Case number (if known) Debtor 1 \$100.00 **Household Decor** 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment □ No Yes. Describe..... 22 LR Sig Sauer Mosquito \$100.00 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Personal Items \$1,000.00 Clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ No Yes. Describe..... Costume Jewerly \$25.00 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$4,595.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

□ No

Cash

\$20.00

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Case number (if known)

,			ints; certificates of deposit; shares in	credit unions, b	rokerage houses,	and other similar
Institutions  ☐ No	i. ir you na	ve multiple accounts v	vith the same institution, list each.			
■ Yes			Institution name:			
	17.1.	Checking	Navy Federal Credit Unio Acct:# 9189	n		\$41.18
	17.2.	Savings	Navy Federal Credit Unio Acct:# 2512	n		\$0.04
	17.3.	Checking	Boeing Employees' Credi Acct:# 4368	t Union		\$146.63
	17.4.	Savings	Boeing Employees' Credi Acct:# 4293	t Union		\$1.20
	17.5.	Certificate of Deposit	USAA CD Acct: #5077 (Secures USAA Credit Ca	rd Acct #2503	3)	\$722.03
<ul> <li>19. Non-publicly traded s joint venture  ☐ No ☐ Yes. Give specific in</li> </ul>	nformation Nai	·		ses, including a		.LC, partnership, and
	Ge  (M: op ou  Ge co on a fi ute	s. Mitchell operated off since 2011. Sile proprietorship be 20. The debtor used equiptment for the siness. The LLC regrated since Marchetbreak.)  echie Grub, LLC sechie Grub, L	d this catering business on She initially operated as a put opened the LLC in early less her personal kitchenware the operation of this lemains open but has not the 2020 due to the COVID-19 left them unable to the business together. The is are tables, chairs, stoves, r, plates, and serving 1,375) which are housed in a the outcome of ongoing Mr. Waters. Geechie Grub,	100	%	\$1.00
		C owes SCDOR sa 3,994.81.)	lles taxes in the amount of	50	%	\$1.00

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

**Lavona Charlene Mitchell** 

Debtor 1

Case 21-01020-dd Doc 1 Filed 04/12/21 Entered 04/12/21 15:14:44 Page 14 of 73 Document Debtor 1 **Lavona Charlene Mitchell** Case number (if known) ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 5

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Debtor 1	Lavona Charlene Mitchel	l	Ca	ase number (if known	n)
28. <b>Tax re</b> □ No	funds owed to you				
■ Yes.	Give specific information about	them, including whether you already filed	the returns and	the tax years	
		No anticipated tax refund			
		(The debtor received her 2			
		and State tax refunds pre-p the amount of \$4,747. The			
		the funds to pay the remain retainer to the Meredith La			
		the amount of \$1,300, repa	id her sister		
		for help with bills and expe (\$1,300), caught up her wa			
		electric bills (\$1,000), purc	hased an		
		airline ticket on a flight for birthday (\$700) and had ma			
		and repairs done on her ve (\$200). The remaing funds			
		we're used on household b			<b></b>
		expenses.		N/A	\$0.00
■ No □ Yes.  30. Other Example ■ No □ Yes.  31. Interest Example □ No	Give specific information  amounts someone owes you ples: Unpaid wages, disability ins benefits; unpaid loans you  Give specific information  sts in insurance policies ples: Health, disability, or life insurance company of Company  America Policy # Effective (Cash S	urance; health savings account (HSA); cr f each policy and list its value. name: an Income Whole Life Insurance	k pay, vacation	pay, workers' comp	ensation, Social Security
	Mitchell		Pat Mitch	ell- Mother	\$731.88
	Policy # Effectiv (Cash S (This po	an Income Whole Life Insurance :4474 e :12/7/2005 urrender Value) blicy insures the life of the s son Anton White Jr.)	Lavona M	litchell	\$476.35
	Policy # Effective	e :9/7/2010			
	(This po	licy insures the life of Terrance			

Official Form 106A/B

Waters)

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**Lavona Mitchell** 

Case 21-01020-dd Doc 1 Filed 04/12/21 Entered 04/12/21 15:14:44 Page 16 of 73 Document Debtor 1 **Lavona Charlene Mitchell** Case number (if known) 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$2,142.31 for Part 4. Write that number here...... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

No

☐ Yes. Give specific information.......

54. Add the dollar value of all of your entries from Part 7. Write that number here ......

\$0.00

Official Form 106A/B Schedule A/B: Property page 7

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Case number (if known) Debtor 1 Lavona Charlene Mitchell Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$40,000.00 Part 2: Total vehicles, line 5 \$2,200.00 57. Part 3: Total personal and household items, line 15 \$4,595.00 58. Part 4: Total financial assets, line 36 \$2,142.31 Part 5: Total business-related property, line 45 59. \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$8,937.31 Copy personal property total \$8,937.31 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$48,937.31

Official Form 106A/B Schedule A/B: Property page 8

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Fill in this information to identify your case:							
s is an							
ing							

#### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B 1908 Alton St. Charleston, SC 29406 S.C. Code Ann. § \$40,000.00 \$56,925.00 **Charleston County** 15-41-30(A)(1)(a) TMS#472-16-00-030 100% of fair market value, up to (The debtor and her sister, Damitria any applicable statutory limit Mitchell inherited this home from their grandfather in 2007. The debtor is informed and believes if they were to sell this property they could r Line from Schedule A/B: 1.1 2007 Infinity G 168,800 miles S.C. Code Ann. § \$2,200.00 \$6,325.00

VIN: JNKBV61E17M718259	ΨΖ,200.00	Ψ0,020.00	15-41-30(A)(2)
(No Lien) Line from Schedule A/B: 3.1		100% of fair market value, up to any applicable statutory limit	10-41-30(A)(2)
Kitchenware Stove Refrigerator Washing Machine Dryer Living Room Furniture Bedroom Furniture Dining Room Furniture Work Tools Line from Schedule A/B: 6.1	\$2,840.00	\$2,840.00  100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(3)

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Brief description of the property and line on	Current value of the	Amo	ount of the exemption you claim	Specific laws that allow exemption
Schedule A/B that lists this property	portion you own Copy the value from	Check only one box for each exemption.		.,
3 Televisions (\$350)	Schedule A/B		¢520.00	S.C. Code Ann. §
Stereo (\$30)	\$530.00		\$530.00	15-41-30(A)(3)
Computer (\$150) Line from <i>Schedule A/B</i> : <b>7.1</b>			100% of fair market value, up to any applicable statutory limit	
Household Decor Line from Schedule A/B: 8.1	\$100.00		\$100.00	S.C. Code Ann. § 15-41-30(A)(3)
			100% of fair market value, up to any applicable statutory limit	
22 LR Sig Sauer Mosquito Line from Schedule A/B: 10.1	\$100.00		\$100.00	S.C. Code Ann. § 15-41-30(A)(7) unused portio
			100% of fair market value, up to any applicable statutory limit	from homestead exemption.
Personal Items Clothing	\$1,000.00		\$1,000.00	S.C. Code Ann. § 15-41-30(A)(3)
Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
Costume Jewerly Line from Schedule A/B: 12.1	\$25.00		\$25.00	S.C. Code Ann. § 15-41-30(A)(4)
Ellio Holli Gonedale 77 B. 1211			100% of fair market value, up to any applicable statutory limit	10 41 00(7)(4)
Cash Line from Schedule A/B: 16.1	\$20.00		\$20.00	S.C. Code Ann. § 15-41-30(A)(7) unused portio
Line nom <i>Scheddie A/B</i> . 10.1			100% of fair market value, up to any applicable statutory limit	from homestead exemption.
Checking: Navy Federal Credit Union Acct:# 9189	\$41.18		\$41.18	S.C. Code Ann. § 15-41-30(A)(7) unused portio
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	from homestead exemption.
Savings: Navy Federal Credit Union Acct:# 2512	\$0.04		\$0.04	S.C. Code Ann. § 15-41-30(A)(7) unused portio
Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	from homestead exemption.
Checking: Boeing Employees' Credit Union	\$146.63		\$146.63	S.C. Code Ann. § 15-41-30(A)(7) unused portio
Acct:# 4368 Line from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	from homestead exemption.
Savings: Boeing Employees' Credit Union	\$1.20		\$1.20	S.C. Code Ann. § 15-41-30(A)(7) unused portio
Acct:# 4293 Line from Schedule A/B: 17.4			100% of fair market value, up to any applicable statutory limit	from homestead exemption.
Certificate of Deposit: USAA CD Acct: #5077	\$722.03		\$722.03	S.C. Code Ann. § 15-41-30(A)(7) unused portic
(Secures USAA Credit Card Acct #2503)			100% of fair market value, up to any applicable statutory limit	from homestead exemption.

De	ebtor 1 Lavona Charlene Mitchell			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Simply Tasteful, LLC	\$1.00		\$1.00	S.C. Code Ann. § 15-41-30(A)(6)
	(Ms. Mitchell operated this catering business on and off since 2011. She initially operated as a sole proprietorship but opened the LLC in early 2020. The debtor uses her personal kitchenware and equiptment for the operation of th Line from <i>Schedule A/B</i> : 19.1			100% of fair market value, up to any applicable statutory limit	
	Geechie Grub, LLC	\$1.00		\$1.00	S.C. Code Ann. § 15-41-30(A)(6)
	(Ms. Mitchell and Terrance L. Waters owned and operated this restaurant until a decline in their personal relationship left them unable to continue to operate the business together. The only remaining assets are tables, chairs, stoves Line from <i>Schedule A/B</i> : 19.2			100% of fair market value, up to any applicable statutory limit	
	American Income Whole Life Insurance	\$731.88		\$731.88	S.C. Code Ann. § 38-63-40(A)
	Policy #:4473 Effective :2/23/2006 (Cash Surrender Value) (This policy insures the life of Lavona Mitchell) Beneficiary: Pat Mitchell- Mother Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
	American Income Whole Life Insurance	\$476.35		\$476.35	S.C. Code Ann. § 38-63-40(A)
	Policy #:4474 Effective :12/7/2005 (Cash Surrender Value) (This policy insures the life of the debtor's son Anton White Jr.) Beneficiary: Lavona Mitchell Line from Schedule A/B: 31.2			100% of fair market value, up to any applicable statutory limit	
	Great West Life Term Life Insurance Policy #:2933	\$1.00		\$1.00	S.C. Code Ann. § 15-41-30(A)(8)
	Effective :9/7/2010 (This policy insures the life of Terrance Waters) Beneficiary: Lavona Mitchell Line from Schedule A/B: 31.3			100% of fair market value, up to any applicable statutory limit	( ) , )
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/22 and every 3 ■ No □ Yes. Did you acquire the property covere □ No □ Yes	years after that for ca	ises fi		

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		Document Page 1	age 21	of 73		
Fill in this information to	identify your	case:				
Debtor 1 Lavo	na Charlene		ast Name		-	
Debtor 2 (Spouse if, filing) First Na	me	Middle Name La	st Name		-	
United States Bankruptcy	Court for the:	DISTRICT OF SOUTH CAROLINA	L.		_	
Case number (if known)						Check if this is an amended filing
Official Form 106E Schedule D: Cr	_	Who Have Claims Se	ecurec	l by Propert	у	12/15
		two married people are filing together, k it, number the entries, and attach it to th				
1. Do any creditors have clair	ms secured by y	our property?				
☐ No. Check this box	and submit this	s form to the court with your other sch	nedules. Yo	ou have nothing else	to report on this f	form.
■ Yes. Fill in all of the	information be	alow		· ·	·	
		Siow.				
Part 1: List All Secure				Column A	Column B	Column C
for each claim. If more than o	ne creditor has a	ore than one secured claim, list the creditor particular claim, list the other creditors in fall order according to the creditor's name.		Amount of claim Do not deduct the value of collateral.	Value of collate that supports the claim	eral Unsecured
2.1 LVNV Funding, L	LC	Describe the property that secures the o	claim:	\$3,095.95	\$80,000	•
Creditor's Name		1908 Alton St. Charleston, SC 2 Charleston County TMS#472-16-00-030				
PO Box 10497		As of the date you file, the claim is: Checapply.	ck all that			
Greenville, SC 29	603	Contingent				
Number, Street, City, State	& Zip Code	☐ Unliquidated				
Who owes the debt? Check		☐ Disputed  Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only		An agreement you made (such as mort car loan)	gage or sec	ured		
Debtor 1 and Debtor 2 only	y	☐ Statutory lien (such as tax lien, mechan	nic's lien)			
☐ At least one of the debtors		■ Judgment lien from a lawsuit				
☐ Check if this claim relate community debt	s to a	Other (including a right to offset)				

Date debt was incurred 1/20

Last 4 digits of account number

1909

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Debtor 1 Lavona Charlene Mitche	<b>ell</b> Ca	se number (if known)		
First Name Middle N	ame Last Name			
2.2 Midland Credit	Describe the property that secures the claim:	\$4,956.21	\$80,000.00	\$4,956.21
Creditor's Name	1908 Alton St. Charleston, SC 29406			<b>V</b> 1,0001_1
oroanor o riamo	Charleston County			
	TMS#472-16-00-030			
350 Camino De La Reina Suite 100	As of the date you file, the claim is: Check all that			
San Diego, CA 92108	apply.			
	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who are the debto of	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secur	red		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a	☐ Other (including a right to offset)			
community debt				
Date debt was incurred 2/19	Last 4 digits of account number 6245			
Date dest was medired 2/13				
2.3 OneMain Financial	Describe the property that secures the claim:	\$8,612.22	\$80,000.00	\$8,612.22
Creditor's Name	1908 Alton St. Charleston, SC 29406		400,000.00	<b>4</b> 0,0:2:22
	Charleston County			
Attn: Bankruptcy	TMS#472-16-00-030			
Po Box 3251	As of the date you file, the claim is: Check all that			
Evansville, IN 47731	apply. □ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Number, Street, City, State & Zip Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
_	☐ An agreement you made (such as mortgage or secur	d		
Debtor 1 only	car loan)	leu		
Debtor 2 only	_			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Onanad				
Opened 9/13/16				
Last Active				
Date debt was incurred 9/30/19	Last 4 digits of account number 7970			

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Debtor 1 Lavona Charlene Mitchell		Case number (if known)				
First Name	Middle N					
2.4 Popublic Fina	noo	Describe the property that conurse the claims	¢2 549 40	¢00 000 00	¢2 549 40	
Z.4 Republic Fina Creditor's Name	nce	Describe the property that secures the claim:  1908 Alton St. Charleston, SC 29406 Charleston County TMS#472-16-00-030	\$2,518.19	\$80,000.00	\$2,518.19	
214 Saint Jam	es Ave Ste	As of the date you file, the claim is: Check all that apply.				
Goose Creek,	SC 29445	Contingent				
Number, Street, City, S	State & Zip Code	☐ Unliquidated ☐ Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		An agreement you made (such as mortgage or	secured			
Debtor 2 only		car loan)				
Debtor 1 and Debtor 2		☐ Statutory lien (such as tax lien, mechanic's lien)				
☐ At least one of the del	otors and another	Judgment lien from a lawsuit				
☐ Check if this claim re community debt	elates to a	Other (including a right to offset)				
Date debt was incurred	Opened 01/17 Last Active 11/13/18	Last 4 digits of account number 311	4			
USAA Federal	l Savings					
Bank	Javings	Describe the property that secures the claim:	\$460.00	\$722.03	\$0.00	
Creditor's Name		Certificate of Deposit: USAA CD	]			
Attn: Bankrup		Acct: #5077 (Secures USAA Credit Card Acct #2503)				
10750 Mcdern Freeway	iott	As of the date you file, the claim is: Check all that	J			
San Antonio,	TX 78288	apply.  Contingent				
Number, Street, City, S		☐ Unliquidated				
Who owes the debt?	·	☐ Disputed  Nature of lien. Check all that apply.				
■ Debtor 1 only		■ An agreement you made (such as mortgage or	secured			
Debtor 2 only		car loan)				
Debtor 1 and Debtor 2	2 only	☐ Statutory lien (such as tax lien, mechanic's lien)				
☐ At least one of the del	otors and another	☐ Judgment lien from a lawsuit				
Check if this claim re community debt	elates to a	Other (including a right to offset)  Secured	Credit Card			
Date debt was incurred	Opened 03/12 Last Active 11/18/20	Last 4 digits of account number 250	3			
Add the dollar value o	f your entries in C	Column A on this page. Write that number here:	\$19,642.5	57		
If this is the last page Write that number her	•	the dollar value totals from all pages.	\$19,642.5	57		
Part 2: List Others	to Be Notified fo	or a Debt That You Already Listed				
trying to collect from yo	ou for a debt you only of the debts that	oe notified about your bankruptcy for a debt that yowe to someone else, list the creditor in Part 1, and tyou listed in Part 1, list the additional creditors half page.	d then list the collection agen	cy here. Similarly, if yo	u have more	
	Street, City, State &		which line in Part 1 did you enter	the creditor? 2.3		
P.O. Box 902 Indianapolis	260		4 digits of account number			

Official Form 106D

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Debtor	1 Lavona Charlene Mitchell	Case number (if known)	
	First Name Middle Name	Last Name	
	Name, Number, Street, City, State & Zip Code Christopher J. Neeson Esq. P.O. Box 90260	On which line in Part 1 did you enter the creditor? _2.3_  Last 4 digits of account number	
	Indianapolis, IN 46290		
	Name, Number, Street, City, State & Zip Code Clarkson and Hale, LLC	On which line in Part 1 did you enter the creditor?	
	1044 Wildwood Centre Drive Columbia, SC 29202	Last 4 digits of account number	
	Name, Number, Street, City, State & Zip Code	On which line in Part 1 did you enter the creditor? _2.2_	
	Kevin K. Corley Esq. P.O. Box 287 Columbia, SC 29202	Last 4 digits of account number	
	Name, Number, Street, City, State & Zip Code Michael B. Travis Esq. 1744 Sam Rittenburg Blvd. Ste. D	On which line in Part 1 did you enter the creditor?	
	Charleston, SC 29407		
	Name, Number, Street, City, State & Zip Code Nancy C. Fennell Esq. P.O. Box 2176 Irmo, SC 29063	On which line in Part 1 did you enter the creditor?  Last 4 digits of account number	
	Name, Number, Street, City, State & Zip Code Resurgent Capital Services	On which line in Part 1 did you enter the creditor?	
	PO Box 1927 Greenville, SC 29602	Last 4 digits of account number	
	Name, Number, Street, City, State & Zip Code Scott & Associates, PC 1744 Sam Rittenberg Blvd, Ste. D Charleston, SC 29407	On which line in Part 1 did you enter the creditor?	

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	Document	Page 25 c	of 73			
Fill in this information to identify your	case:					
Debtor 1 Lavona Charlene	Mitchell					
First Name	Middle Name	Last Name				
Debtor 2						
(Spouse if, filing) First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:	DISTRICT OF SOUTH CAR	ROLINA				
Case number						
(if known)					Check if this is	s an
					amended filin	g
Official Form 106E/F						
Schedule E/F: Creditors W	ho Have Unsecur	od Claime			12	/15
Be as complete and accurate as possible. Us			2 for craditors with NO	NDDIODITY		
Schedule D: Creditors Who Have Claims Sec eft. Attach the Continuation Page to this pa- name and case number (if known).  Part 1: List All of Your PRIORITY U	ge. If you have no information to					
Do any creditors have priority unsecure						
□ No. Go to Part 2.	, a olamo agamoi you :					
■ Yes.						
<ol> <li>List all of your priority unsecured claim identify what type of claim it is. If a claim h possible, list the claims in alphabetical ord Part 1. If more than one creditor holds a part</li> </ol>	as both priority and nonpriority am ler according to the creditor's name	nounts, list that claim he ne. If you have more tha	ere and show both priority	and nonpriori	ty amounts. As m	uch as
(For an explanation of each type of claim,	see the instructions for this form in	n the instruction bookle		B.111		
			Total claim	Priority amount	Nonpr amou	
2.1 Internal Revenue Service	Last 4 digits of ac	count number	\$0.00	)	\$0.00	\$0.00
Priority Creditor's Name	When was the deb	ht inquerod?				
Centralized Insolvency Operations	When was the der	ot incurred?		_		
PO Box 7346						
Philadelphia, PA 19101-734  Number Street City State Zip Code		u file, the claim is: Che	ack all that apply			
Who incurred the debt? Check one.	☐ Contingent	ine, the claim is. One	ск ан шасарру			
■ Debtor 1 only	☐ Unliquidated					
Debtor 2 only	<u> </u>					
Debtor 1 and Debtor 2 only	☐ Disputed  Type of PRIORITY	unsecured claim:				
☐ At least one of the debtors and anoth						
		ain other debts you owe	the government			
☐ Check if this claim is for a commu Is the claim subject to offset?	•	ain otner debts you owe h or personal injury whi	•			
No	☐ Other. Specify	ii oi poisonai injury Will	io jou word intoxicated			
☐ Yes	Other. Specify	Notice Only				

Case 21-01020-dd Doc 1 Filed 04/12/21 Entered 04/12/21 15:14:44 Document Page 26 of 73 Debtor 1 Lavona Charlene Mitchell Case number (if known) Last 4 digits of account number \$0.00 2.2 SC Department of Revenue \$23,994.81 \$23,994.81 Priority Creditor's Name PO Box 12265 When was the debt incurred? Columbia, SC 29211 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations ☐ At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No Other, Specify ☐ Yes Sales tax -- Geechie Grub, LLC (The debtor understands this debt is non-dischargeable within this Chapter 7 Case.) Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you?  $\square$  No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.lf you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 **Belk/Synchrony Bank** Last 4 digits of account number 3752 \$500.00 Nonpriority Creditor's Name P.O. Box 530940 When was the debt incurred? Atlanta, GA 30353 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

☐ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

debt

■ No

☐ Yes

Is the claim subject to offset?

report as priority claims

■ Other. Specify Credit Card

Lavona Charlene Mitchell		Case number (if known)	
Bon Secours St. Francis Hospital	Last 4 digits of account number	1330	\$3,922.10
Nonpriority Creditor's Name PO Box 650292 Dallas, TX 75265-0292	When was the debt incurred?	10/20	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Medical		
C.O. Federal Credit Union	Last 4 digits of account number	0002	\$6,220.00
Nonpriority Creditor's Name  117 Spring Street, #C  Charleston, SC 29403	When was the debt incurred?	Opened 09/16 Last Active 06/18	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community		aration agreement or divorce that you did not	
ls the claim subject to offset? ■	report as priority claims  Debts to pension or profit-sharir	an plane and other similar debte	
■ No □ Yes	Other. Specify Unsecured		
Capital One Nonpriority Creditor's Name	Last 4 digits of account number	7507	\$3,801.00
Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 06/14 Last Active 07/18	
Salt Lake City, UT 84130  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other, Specify Credit Card	d	

4.5	Eastern Account System, Inc.	Last 4 digits of account number	0279	\$207.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 837	When was the debt incurred?	Opened 7/24/17	
	Newtown, CT 06470	_		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	_			
	■ Debtor 1 only	Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	1 claim:	
	☐ At least one of the debtors and another	Student loans	a Claiiii.	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other Specify Collections	wow	
4.6	Forest Recovery Service	Last 4 digits of account number	2006	\$187.00
	Nonpriority Creditor's Name	_		<u> </u>
	Po Box 83	When was the debt incurred?	Opened 06/20	
	Barrington, IL 60011  Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharin	a plane, and other similar debte	
	■ No	·	•	
	Yes	Other. Specify Collections	The Breast Place	
4.7	Koontz Mlynarczyk, LLC Nonpriority Creditor's Name	Last 4 digits of account number	4570	\$1,850.00
	1058 East Montague Ave. North Charleston, SC 29405	When was the debt incurred?	2019	
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Attorney's	rees	

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Midland Funding LLC Nonpriority Creditor's Name	Last 4 digits of account number	7085	\$2,700.00
350 Camino De La Reina, Suite 100 San Diego, CA 92108	When was the debt incurred?	Opened 02/19 Last Active 07/18	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Bank	Company Account Synchrony	
Midland Funding LLC Nonpriority Creditor's Name	Last 4 digits of account number	7081	\$2,496.0
350 Camino De La Reina, Suite 100 San Diego, CA 92108	When was the debt incurred?	Opened 02/19 Last Active 08/18	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
□ Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Bank	Company Account Synchrony	
Navient	Last 4 digits of account number	0905	\$4,587.0
Nonpriority Creditor's Name		Opened 09/17 Last Active	
PO Box 9500 Wilkes Barre, PA 18773	When was the debt incurred?	11/28/20	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset? —	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify		
	(The debto	y-Educational r understands this debt is irgeable within this bankruptcy	

Official Form 106 E/F

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t as priority claims ebts to pension or profit-sharin ther. Specify  Notice Onl (The debto	,,,,	
ontingent inliquidated isputed of NONPRIORITY unsecure tudent loans bligations arising out of a sepat t as priority claims ebts to pension or profit-sharin ther. Specify  Notice Onl (The debto non-discha	is: Check all that apply  d claim:  aration agreement or divorce that you did not ag plans, and other similar debts  y-Educational ar understands this debt is	
ontingent nliquidated isputed of NONPRIORITY unsecure tudent loans bligations arising out of a sepat t as priority claims ebts to pension or profit-sharin ther. Specify  Notice Onl (The debto non-discha	d claim:  aration agreement or divorce that you did not  ng plans, and other similar debts  y-Educational or understands this debt is	
nliquidated isputed of NONPRIORITY unsecure tudent loans bligations arising out of a sepa t as priority claims ebts to pension or profit-sharin ther. Specify  Notice Onl (The debto non-discha	aration agreement or divorce that you did not ng plans, and other similar debts  y-Educational or understands this debt is	
isputed  of NONPRIORITY unsecure tudent loans bligations arising out of a separate as priority claims ebts to pension or profit-sharin ther. Specify  Notice Onl (The debto non-discha	aration agreement or divorce that you did not ng plans, and other similar debts  y-Educational or understands this debt is	
of NONPRIORITY unsecure tudent loans bligations arising out of a separate as priority claims ebts to pension or profit-sharin ther. Specify  Notice Onl (The debto non-discha	aration agreement or divorce that you did not ng plans, and other similar debts  y-Educational or understands this debt is	
tudent loans bligations arising out of a separt as priority claims ebts to pension or profit-sharing ther. Specify  Notice Onl (The debtoonon-discha	aration agreement or divorce that you did not ng plans, and other similar debts  y-Educational or understands this debt is	
bligations arising out of a separate as priority claims ebts to pension or profit-sharing ther. Specify  Notice Onl (The debto non-dischar	y-Educational r understands this debt is	
t as priority claims ebts to pension or profit-sharin ther. Specify  Notice Onl (The debto non-discha	y-Educational r understands this debt is	
ther. Specify  Notice Onl (The debto	y-Educational r understands this debt is	
Notice Onl (The debto non-discha	r understands this debt is	
(The debto non-discha	r understands this debt is	
4 digits of account number	0128	\$2,25
	0	
n was the debt incurred?	Opened 01/19 Last Active 11/28/20	
the date you file, the claim	is: Check all that apply	
ontingent		
nliquidated		
•		
	d claim:	
	aration agreement or divorce that you did not	
ebts to pension or profit-sharing	ng plans, and other similar debts	
ther. Specify		
t	ontingent nliquidated isputed of NONPRIORITY unsecure tudent loans ibligations arising out of a separt as priority claims ebts to pension or profit-sharing ther. Specify  Notice Onl	nliquidated isputed of NONPRIORITY unsecured claim: tudent loans bligations arising out of a separation agreement or divorce that you did not t as priority claims ebts to pension or profit-sharing plans, and other similar debts

case.)

Navient	Last 4 digits of account number	0612	\$2,1
Nonpriority Creditor's Name		Opened 06/17 Last Active	
PO Box 9500 Wilkes Barre, PA 18773	When was the debt incurred?	11/28/20	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify		
	case.)		
Navient	case.)  Last 4 digits of account number	0128	\$2,1
Navient Nonpriority Creditor's Name	,		\$2,1
	,	0128 Opened 01/19 Last Active 11/28/20	\$2,1
Nonpriority Creditor's Name PO Box 9500	Last 4 digits of account number	Opened 01/19 Last Active 11/28/20	\$2,1
PO Box 9500 Wilkes Barre, PA 18773 Number Street City State Zip Code	Last 4 digits of account number  When was the debt incurred?	Opened 01/19 Last Active 11/28/20	\$2,1
PO Box 9500 Wilkes Barre, PA 18773 Number Street City State Zip Code Who incurred the debt? Check one.	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim	Opened 01/19 Last Active 11/28/20	\$2,1
Nonpriority Creditor's Name  PO Box 9500  Wilkes Barre, PA 18773  Number Street City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim  Contingent Unliquidated Disputed	Opened 01/19 Last Active 11/28/20 is: Check all that apply	\$2,1
PO Box 9500 Wilkes Barre, PA 18773 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim  Contingent Unliquidated Disputed Type of NONPRIORITY unsecure	Opened 01/19 Last Active 11/28/20 is: Check all that apply	\$2,1
PO Box 9500 Wilkes Barre, PA 18773 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim  Contingent Unliquidated Disputed Type of NONPRIORITY unsecure Student loans	Opened 01/19 Last Active 11/28/20 is: Check all that apply	\$2,1
Nonpriority Creditor's Name  PO Box 9500 Wilkes Barre, PA 18773  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim  Contingent Unliquidated Disputed Type of NONPRIORITY unsecure Student loans	Opened 01/19 Last Active 11/28/20 is: Check all that apply	\$2,1
Nonpriority Creditor's Name  PO Box 9500 Wilkes Barre, PA 18773  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim  Contingent Unliquidated Disputed Type of NONPRIORITY unsecure Student loans Obligations arising out of a separation.	Opened 01/19 Last Active 11/28/20 is: Check all that apply d claim:	\$2,1

case.)

Navient		Last 4 digits of account number	0911	\$1,500.
Nonpriority Creditor's N	lame	-	Opened 00/40 Lept Active	
PO Box 9500 Wilkes Barre, PA	18773	When was the debt incurred?	Opened 09/19 Last Active 11/28/20	
Number Street City Sta Who incurred the deb	•	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only		☐ Contingent		
Debtor 2 only		☐ Unliquidated		
Debtor 1 and Debto	or 2 only	☐ Disputed		
☐ At least one of the o	debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim	is for a community	Student loans		
debt Is the claim subject to	o offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No		Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes		☐ Other. Specify		
			r understands this debt is rgeable within this bankruptcy	
Navient		(The debto non-discha case.)	r understands this debt is	\$1,363.
Navient Nonpriority Creditor's N	lame	(The debto non-discha	r understands this debt is rgeable within this bankruptcy  0911	\$1,363.
Nonpriority Creditor's N PO Box 9500		(The debto non-discha case.)	r understands this debt is rgeable within this bankruptcy	\$1,363.
Nonpriority Creditor's N	. <b>18773</b> tte Zip Code	(The debtonon-dischacase.)  Last 4 digits of account number	opened 09/19 Last Active	\$1,363.
Nonpriority Creditor's N PO Box 9500 Wilkes Barre, PA Number Street City Sta	. <b>18773</b> tte Zip Code	(The debtonon-dischacase.)  Last 4 digits of account number  When was the debt incurred?	opened 09/19 Last Active	\$1,363.
Nonpriority Creditor's N PO Box 9500 Wilkes Barre, PA Number Street City Sta Who incurred the deb	. <b>18773</b> tte Zip Code	(The debtonon-dischar case.)  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim in	opened 09/19 Last Active	\$1,363.
Nonpriority Creditor's N PO Box 9500 Wilkes Barre, PA Number Street City Sta Who incurred the deb	te Zip Code tr? Check one.	(The debton non-discharcase.)  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim in the contingent	opened 09/19 Last Active	\$1,363.
Nonpriority Creditor's N PO Box 9500 Wilkes Barre, PA Number Street City Sta Who incurred the deb Debtor 1 only Debtor 2 only	at 18773  Inter Zip Code  Inter Check one.	(The debton non-discharcase.)  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim in Contingent  Unliquidated	opened 09/19 Last Active 11/28/20 s: Check all that apply	\$1,363.
Nonpriority Creditor's N PO Box 9500 Wilkes Barre, PA Number Street City Sta Who incurred the deb Debtor 1 only Debtor 2 only Debtor 1 and Debtor	ate Zip Code of? Check one. or 2 only debtors and another	(The debton non-dischar case.)  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim in the contingent Unliquidated Disputed	opened 09/19 Last Active 11/28/20 s: Check all that apply	\$1,363
Nonpriority Creditor's N PO Box 9500 Wilkes Barre, PA Number Street City Sta Who incurred the deb Debtor 1 only Debtor 2 only Debtor 1 and Debto At least one of the or	ate Zip Code of? Check one. or 2 only debtors and another a is for a community	(The debton non-dischar case.)  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim in the contingent Unliquidated Disputed  Type of NONPRIORITY unsecured Student loans	opened 09/19 Last Active 11/28/20 s: Check all that apply	\$1,363.
Nonpriority Creditor's N PO Box 9500 Wilkes Barre, PA Number Street City Sta Who incurred the deb Debtor 1 only Debtor 2 only Debtor 1 and Debto At least one of the co	ate Zip Code of? Check one. or 2 only debtors and another a is for a community	(The debton non-dischar case.)  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim in the contingent Incurred	Opened 09/19 Last Active 11/28/20 s: Check all that apply	\$1,363.

case.)

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Debto	Lavona Charlene Mitchell		Case number (if known)	
4.1	Navy Federal Credit Union	Last 4 digits of account number	7553	\$155.88
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3000 Merrifield, VA 22119 Number Street City State Zip Code	When was the debt incurred?  As of the date you file, the claim	Opened 10/20 Last Active 11/18/20 is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u>d</u>	
4.1	Palmetto Primary Care	Last 4 digits of account number	0179	\$246.05
	Nonpriority Creditor's Name 201 Sigma Drive Ste 100	When was the debt incurred?	10/19	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Medical		
4.1	Portfolio Recovery Associates, LLC Nonpriority Creditor's Name	Last 4 digits of account number	9984	\$1,067.23
	120 Corporate Blvd Norfolk, VA 23502	When was the debt incurred?	Opened 01/20 Last Active 09/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts	
	Yes	Factoring 6  Other Specify Bank	Company Account Synchrony	

Debi	Lavona Charlene Milchen	Case number (il kilowil)	
4.2 0	Roper Radiologists	Last 4 digits of account number 3690	\$345.00
	Nonpriority Creditor's Name PO Box 2363	When was the debt incurred? 10/20	
	Indianapolis, IN 46206-2363  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	7.6 of the date yearing, the claim io. Officer all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify Medical	
4.2			
1	Synchrony Bank/PayPal	Last 4 digits of account number 7269	\$215.79
	Nonpriority Creditor's Name PO Box 965060	When was the debt incurred? 1/20	
	Orlando, FL 32896	1/20	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify Credit Card	
4.2	 		
2	Terrance Waters	Last 4 digits of account number	\$1.00
	Nonpriority Creditor's Name C/O The Whitsitt Law Firm 1476 Ben Sawyer Blvd.	When was the debt incurred?	
	Mount Pleasant, SC 29464	_	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  ☐ Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	-	Potential liability arising from pending	
	☐ Yes	Other. Specify lawsuit	

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Debtor	1 Lavona Charlene Mitchell		Case number (if known)	
4.2	USAA	Last 4 digits of account number	1231	\$1,155.87
	Nonpriority Creditor's Name 9800 Frederickburg Road San Antonio, TX 78288	When was the debt incurred?		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-shari	ng plans, and other similar debts	
	□ Yes	Other. Specify Collections		
4.2	USAA Credit Card Payments	Last 4 digits of account number	8497	\$622.74
	Nonpriority Creditor's Name		· ·	<u>-</u>
	10750 McDermott Fwy San Antonio, TX 78288	When was the debt incurred?	11/20	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Credit Care	1	
Part 3:	List Others to Be Notified About a D	ebt That You Already Listed		
is tryi have	nis page only if you have others to be notified ing to collect from you for a debt you owe to s more than one creditor for any of the debts the ed for any debts in Parts 1 or 2, do not fill out	someone else, list the original creditor in at you listed in Parts 1 or 2, list the add	Parts 1 or 2, then list the collection agency	here. Similarly, if you
	and Address	On which entry in Part 1 or Part 2 did you	_	
	andon Belger, Esq. East Montague Ave		Part 1: Creditors with Priority Unsecured Clain	
	Charleston, SC 29405		Part 2: Creditors with Nonpriority Unsecured	Claims
		Last 4 digits of account number		
Name a	and Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	
	son Capital Systems, LLC		Part 1: Creditors with Priority Unsecured Claim	ms
	Leland Rd.		Part 2: Creditors with Nonpriority Unsecured	Claims
Saint	Cloud, MN 56303	Last 4 digits of account number		
Name a	and Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	
	Funding, LLC	Line 4.1 of (Check one):	Part 1: Creditors with Priority Unsecured Claim	ms
	ox 10497 nville, SC 29603		Part 2: Creditors with Nonpriority Unsecured	Claims
J10611		Last 4 digits of account number	9819	
Name a	and Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	
Micha	el A. Whitsitt Esq.		Part 1: Creditors with Priority Unsecured Claim	ms
	Ben Sawyer Blvd., Suite 3		Part 2: Creditors with Nonpriority Unsecured	
Moun	t Pleasant, SC 29464		. ,	

Official Form 106 E/F

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Debtor 1 Lavona Charlene Mitchell

Case number (if known)

Last 4 digits of account number

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Tatal	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 23,994.81
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 23,994.81
				Total Claim
Total	6f.	Student loans	6f.	\$ 18,360.00
claims	0-	Oblinations of the consenting and the discount of the consenting and the consent of the consent		
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 25,692.66
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 44,052.66

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Fill in this infor				
Debtor 1	Lavona Charlene	Mitchell		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF SOUTH (	CAROLINA	
Case number				
(if known)				☐ Check if this
				amended filir

### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit Name, Numb	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for	
2.1						
	Name				_	
	Number	Street				
	City		State	ZIP Code		
2.2						
	Name					
	Number	Street			_	
	City		State	ZIP Code		
2.3	<u> </u>		Otato			
	Name				_	
	Number	Street			_	
	City		State	ZIP Code	<del>_</del>	
2.4						
	Name				_	
	Number	Street				
	City		State	ZIP Code	_	
2.5	•					
	Name				_	
	Number	Street			_	
	City		State	ZIP Code	<del>_</del>	
	Oity		Oldic			

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		Docume	nı Page 38 C	11 / 3	
Fill in this	information to identify your	case:			
Debtor 1	Lavana Charlana	Mitaball			
Deploi	Lavona Charlene First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filin	ng) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	DISTRICT OF SOUTH	CAROLINA		
Case numb	per				☐ Check if this is an
(ii idiowii)					☐ Check if this is an amended filing
					g
Official	l Form 106H				
Sched	ule H: Your Cod	ehtors			12/15
<u> </u>	die II. Tour ood	CDIOIS			12/15
our name	and case number (if known)	. Answer every question			of any Additional Pages, write
50	you have any coupling (ii	you are ming a joint oase,	do not not citror opouse	do a codebior.	
■ No □ Yes					
Arizona	nin the last 8 years, have you a, California, Idaho, Louisiana, Go to line 3. . Did your spouse, former spou	Nevada, New Mexico, Pu	erto Rico, Texas, Wash		states and territories include
in line Form out Co	2 again as a codebtor only i	f that person is a guaran Form 106E/F), or Sched	tor or cosigner. Make	sure you have listed the 06G). Use Schedule D, So	with you. List the person shown creditor on Schedule D (Official chedule E/F, or Schedule G to fill itor to whom you owe the debt
				Chook all concadios	та арру.
3.1				Schedule D, line	
	Name			☐ Schedule E/F, line	e
				☐ Schedule G, line	
	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	e
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		

# 

Debtor 1  Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the: DISTRICT OF SOUTH CAROLINA  Case number (If known)  Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date:  MM / DD/ YYYY  Schedule I: Your Income  12/15  Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed,	Fill	in this information to identify your o	ase.							
United States Bankruptcy Court for the: DISTRICT OF SOUTH CAROLINA  Case number (If known)  Official Form 106   Schedule I: Your Income  Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for sputplying correct information. If you are separated and your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question information.  If you have more than one job, attach as separate page with information.  If you have more than one job, attach as separate page with information.  Occupation Include part-time, seasonal, or self-employed work.  Employer's address  Employer's address  Case number (If known). Answer every question the poor of any additional pages, write your name and case number (if known). Answer every question to the poor of any additional pages, write your name and case number (if known). Answer every question information.  If you have more than one job, attach a separate page with information.  Debtor 1  Debtor 2 or non-filling spouse  Employed Solve Imployed  Imployed Solve Imployed Solv										
Case number (If known)  Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date:  MM / DD/ YYYY  12/15  Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If more space is needed, attach a separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separated sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question  Part 1: Describe Employment  If you have more than one job, attach a separate page with information.  If you have more than one job, attach a separate page with information about additional employers.  Occupation Longshoreman  Include part-time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  Part 2: Give Details About Monthly Income  Employer's address  T45 Johnnie Dodds Blvd, Ste B Mount Pleasant, SC 29464  How long employers on the fine species for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1 For Debtor 2 or non-filing spouse  List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 861.69 \$ N/A  3. Estimate and list monthly overtime pay.						_				
Official Form 106  Schedule I: Your Income  Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for sputs, include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form.  1. Fill in your employment information.  If you have more than one job, attach a separate page with information about down and information about additional employers.  Occupation may include student or homemaker, if it applies.  Employer's name  Employer's name  Employer's address  T45 Johnnie Dodds Blvd, Ste B Mount Pleasant, SC 29464  How long employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse more space, attach a separate sheet to this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1 For Debtor 2 or non-filing spouse.  List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  Schief the following date:  12/16/16/16/16/16/16/16/16/16/16/16/16/16/	Uni	ted States Bankruptcy Court for the	E: DISTRICT OF SOUTH	H CAROLINA						
Schedule I: Your Income  12/15  Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question information.  If you have more than one job, attach a separate page with information about additional employers.  Occupation  Occupation  Occupation  Occupation may include student or homemaker, if it applies.  Employer's address  T45 Johnnie Dodds Blvd, Ste B Mount Pleasant, SC 29464  How long employed there? 7 Months  Part 2:  Give Details About Monthly Income  Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1  For Debtor 2 or non-filing spouse  List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  2. \$ 861.69 \$ N/A				-			An amende A suppleme	d filing ent showing		chapter
Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question  Part 1:  Describe Employment  1. Fill in your employment information.  If you have more than one job, attach a separate page with information about additional employers.  Cocupation  Occupation  Occupation may include student or homemaker, if it applies.  Employer's name  Employer's name  Employer's address  Employer's address  Marine Terminals Corporation - East  745 Johnnie Dodds Blvd, Ste B Mount Pleasant, SC 29464  How long employed there? 7 Months  Part 2:  Give Details About Monthly income  Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated.  If you or your non-filling spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1 For Debtor 2 or non-filling spouse  List monthly gross wages, salary, and commissions (before all payroll  2. deductions). If not paid monthly, calculate what the monthly wage would be.  2. \$ 861.69 \$ N/A  N/A	Of	fficial Form 106I				_			nowing date.	
supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question    Part 1:	So	chedule I: Your Inc	ome			'	ו ישט יוואו	111		12/15
Information.  If you have more than one job, attach a separate page with information about additional employers.  Occupation  Include part-time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  Occupation  Employer's name  Employer's address  T45 Johnnie Dodds Blvd, Ste B Mount Pleasant, SC 29464  How long employed there?  7 Months  Fart 2:  Give Details About Monthly Income  Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  2. \$ 861.69 \$ N/A  N/A	sup <sub>l</sub> spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.	are married and not filing wi	ng jointly, and your spith you, do not include	oouse e infor	is living wit <mark>l</mark> mation abວເ	n you, inclu It your spo	ude inform ouse. If mo	ation about re space is i	your needed,
attach a separate page with information about additional employers.  Include part-time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  Employer's name  Employer's address  T45 Johnnie Dodds Blvd, Ste B Mount Pleasant, SC 29464  How long employed there?  7 Months  Fart 2:  Give Details About Monthly Income  Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filling spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  Longshoreman  Marine Terminals Corporation - East  745 Johnnie Dodds Blvd, Ste B Mount Pleasant, SC 29464  How long employed there?  7 Months  For Debtor 1 For Debtor 2 or non-filling spouse  List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  2. \$ 861.69 \$ N/A  3. Estimate and list monthly overtime pay.	1.			Debtor 1			Debtor 2 or non-filing spouse			
Include part-time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  Part 2: Give Details About Monthly Income  Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  2. \$ 861.69 \$ N/A  3. Estimate and list monthly overtime pay.  3. +\$ 0.00 +\$ N/A			Empleyment status	■ Employed			☐ Emplo	oyed		
Include part-time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  Employer's name  Employer's address  T45 Johnnie Dodds Blvd, Ste B Mount Pleasant, SC 29464  How long employed there?  7 Months  Part 2: Give Details About Monthly Income  Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1 For Debtor 2 or non-filing spouse  List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  2. \$ 861.69 \$ N/A  3. Estimate and list monthly overtime pay.  3. +\$ 0.00 +\$ N/A		information about additional	Employment status	☐ Not employed			☐ Not e	mployed		
Self-employed work. Occupation may include student or homemaker, if it applies.  Employer's address Employer's address  T45 Johnnie Dodds Blvd, Ste B Mount Pleasant, SC 29464  How long employed there? T Months  Fart 2:  Give Details About Monthly Income  Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1  For Debtor 2 or non-filing spouse  List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  2. \$ 861.69 \$ N/A  3. Estimate and list monthly overtime pay.  3. +\$ 0.00 +\$ N/A			Occupation	Longshoreman						
The properties or homemaker, if it applies.    For Debtor 1   For Debtor 2 or non-filing spouse space, attach a separate sheet to this form.   List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.   Stimate and list monthly overtime pay.   Stimate sheet and list monthly overtime pay.   Stimate sheet she		self-employed work.	Employer's name							
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1  For Debtor 2 or non-filling spouse  List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  2. \$ 861.69 \$ N/A  3. Estimate and list monthly overtime pay.  3. +\$ 0.00 +\$ N/A			Employer's address							
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1  For Debtor 2 or non-filing spouse  2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  2. \$ 861.69 \$ N/A  3. Estimate and list monthly overtime pay.  3. +\$ 0.00 +\$ N/A			How long employed to	here? 7 Months	S		. <u> </u>			
spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1  For Debtor 2 or non-filing spouse  2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  2. \$ 861.69 \$ N/A  3. Estimate and list monthly overtime pay.  3. +\$ 0.00 +\$ N/A	Par	t 2: Give Details About Mo	nthly Income							
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  2. \$ 861.69 \$ N/A  3. Estimate and list monthly overtime pay.  3. +\$ 0.00 +\$ N/A	spou	use unless you are separated. u or your non-filing spouse have m	ore than one employer, co	, ,		•			·	J
2. deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$861.69 \$ N/A  3. Estimate and list monthly overtime pay. 3. +\$000 +\$ N/A						For De	ebtor 1			
	2.				2.	\$	861.69	\$	N/A	
4. Calculate gross Income. Add line 2 + line 3. 4. \$861.69_ \$N/A_	3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$	N/A	
	4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$8	861.69	\$	N/A	

Official Form 106l Schedule I: Your Income page 1

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Deb	tor 1	Lavona Charlene Mitchell		Case n	umber (if known)			
				For D	Debtor 1	For Deb	tor 2 or g spouse	
	Cop	y line 4 here	4.	\$	861.69	\$	N/A	-
5.	List	all payroll deductions:						
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a. 5b.	\$	101.69	\$	N/A N/A	-
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	-
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	-
	5e.	Insurance	5e.	\$	0.00	\$	N/A	-
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	_
	5g.	Union dues	5g.	\$	40.73	\$	N/A	-
	5h.	Other deductions. Specify:	_ 5h.+	- \$	0.00	+ \$	N/A	-
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	142.42	\$	N/A	-
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	719.27	\$	N/A	-
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	-
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	-
	8e.	Social Security	8e.	\$	0.00	\$	N/A	-
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	 8g.	\$	0.00	\$	N/A	-
		Net income from Charleston						-
	8h.	Other monthly income. Specify: Stevedoring Company	_ 8h.⊣	· · —		+ \$	N/A	_
		Contributions from Debtor's Father	_	\$	200.00	\$	N/A	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	404.38	\$	N/A	<b>A</b>
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	1	,123.65 + \$_	N	<b>/A</b> = \$	1,123.65
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not a cify:	depen			ed in <i>Sched</i>	dule J. 1. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certain lies				, if it	2. \$	1,123.65
13.	Do y	you expect an increase or decrease within the year after you file this form? No.	?				Combin monthl	ned y income
		Yes. Explain: Ms. Mitchell works for 2 ports in Charleston as a works. The debtor received her last unemploymed does not anticipate an increase or decrease in he	ent be	enefit <sub>l</sub>	payment on N	/larch 1, 2	021. The	

Official Form 106l Schedule I: Your Income page 2

						•			
5111	in this informa	tion to identify yo	our case:						
Deb	tor 1	Lavona Char	lene Mit	chell		Chec	k if this is:		
					_	_	An amended filing		
	tor 2 ouse, if filing)						A supplement show 13 expenses as of	ving postpetition chapt the following date:	er
(0)	odoo, ii iiiiig)					_	To expended do of		
Unit	ed States Bankr	ruptcy Court for the:	DISTR	ICT OF SOUTH CAROLI	NA		MM / DD / YYYY		
Cas	e number								
(If kı	nown)								
$\frown$	fficial Ea	orm 106J				1			
			Evnoi	2000					
		J: Your I			ara filing tagathar b	-4h -22 - 22	ally roomensible fo		2/15
info	rmation. If m		eded, atta	<ul> <li>If two married people ach another sheet to thi on.</li> </ul>					
Par	t 1: Descr	ribe Your House	hold						
1.	Is this a joir								
	■ No. Go to	line 2.							
	☐ Yes. Doe	es Debtor 2 live i	n a sepa	rate household?					
	□N	o							
	□ Y	es. Debtor 2 mus	t file Offic	ial Form 106J-2, <i>Expens</i>	es for Separate House	ehold of Deb	tor 2.		
2.	Do vou have	e dependents?	□ No						
	Do not list D	•		Fill out this information for	Dependent's relat	ionshin to	Dependent's	Does dependent	
	Debtor 2.	ebioi i and	Yes.	each dependent	Debtor 1 or Debto		age	live with you?	
	Do not state	the						□ No	
	dependents				Son		19	Yes	
								□ No	
								☐ Yes	
								□ No	
								☐ Yes	
								□ No	
								☐ Yes	
3.		penses include f people other th		No					
		t people other ti d your dependel		l Yes					
exp	imate your ex enses as of a		our bankr	ly Expenses ruptcy filing date unless by is filed. If this is a su					
app	licable date.								
				government assistance					
	ficial Form 10		u nave in	cluded it on Schedule I	. Your income		Your expe	enses	
`		,							
4.		or home owners and any rent for the		nses for your residence or lot.	Include first mortgag	e 4. \$		0.00	
	If not includ	led in line 4:							
	4a. Real e	estate taxes				4a. \$	i	41.66	
	4b. Prope	rty, homeowner's	s, or rente	r's insurance		4b. \$		0.00	
	4c. Home	maintenance, re	pair, and	upkeep expenses		4c. \$		100.00	
_		owner's associat				4d. \$		0.00	
5.	Additional r	nortgage payme	ents for y	<b>our residence</b> , such as l	nome equity loans	5. \$	i	0.00	

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Deb	otor 1	Lavona Charlene Mitchell	Case num	ber (if known)	
6.	Utiliti	es:			
		Electricity, heat, natural gas	6a.	\$	400.00
	6b.	Water, sewer, garbage collection	6b.	\$	80.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	120.00
	6d.	Other. Specify: Internet and Home Telephone	6d.	\$	120.00
		CPI Security		\$	49.95
7.	Food	and housekeeping supplies		\$	500.00
8.		care and children's education costs	8.	\$	0.00
9.	Cloth	ing, laundry, and dry cleaning	9.	\$	25.00
10.	Perso	onal care products and services	10.	\$	40.00
11.	Medic	cal and dental expenses	11.	\$	30.00
12.	Trans	sportation. Include gas, maintenance, bus or train fare.			
		ot include car payments.	12.	\$	350.00
13.	Enter	tainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
14.	Chari	table contributions and religious donations	14.	\$	0.00
15.	Insur				
		ot include insurance deducted from your pay or included in lines 4 or 20.			<b>.</b>
		Life insurance	15a.	·	50.00
		Health insurance	15b.	·	0.00
		Vehicle insurance	15c.	\$	155.00
		Other insurance. Specify:	15d.	\$	0.00
16.		5. Do not include taxes deducted from your pay or included in lines 4 or 20.	40	•	40.45
		fy: Personal Property Taxes	16.	\$	10.15
17.		Ilment or lease payments:	47-	<b>c</b>	0.00
		Car payments for Vehicle 1	17a.	*	0.00
		Car payments for Vehicle 2	17b.	·	0.00
		Other. Specify:	17c.	\$	0.00
		Other. Specify:	17d.	\$	0.00
18.		payments of alimony, maintenance, and support that you did not report as	18.	\$	0.00
10		cted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).  r payments you make to support others who do not live with you.	10.	\$	0.00
13.	Speci	• • • • • • • • • • • • • • • • • • • •	19.	Ψ	0.00
20		r real property expenses not included in lines 4 or 5 of this form or on Sched		our Income	
20.		Mortgages on other property	20a.		0.00
		Real estate taxes	20b.		0.00
		Property, homeowner's, or renter's insurance	20c.	·	0.00
		Maintenance, repair, and upkeep expenses	20d.	· -	0.00
		Homeowner's association or condominium dues		·	0.00
21		r: Specify: Hair Cuts	21.	·	50.00
۷.,		age Unit		+\$	216.00
	31017	age om		+ψ	210.00
22.	Calcu	ılate your monthly expenses			
	22a. A	Add lines 4 through 21.		\$	2,387.76
	22b. (	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	_
	22c. A	Add line 22a and 22b. The result is your monthly expenses.		\$	2,387.76
23.	Calcu	ılate your monthly net income.			
		Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,123.65
		Copy your monthly expenses from line 22c above.	23b.	·	2,387.76
	-				
	23c.	Subtract your monthly expenses from your monthly income.			4 204 44
		The result is your <i>monthly net income</i> .	23c.	\$	-1,264.11

#### 24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

■ No.

☐ Yes.

Explain here: The debtor's father and son reside with her. The expenses listed here represent the debtor's contribution to the household expenses. The debtor does not anticipate an increase or decrease in her expenditures of 10% or more at this time.

# 

Fill in this in	formation to identify your	case:								
Debtor 1	Lavona Charlene	Mitchell								
	First Name	Middle Name	Last Name							
Debtor 2	First Name	Adiable Nove	LastNama							
(Spouse if, filing)	First Name	Middle Name	Last Name							
United States	Bankruptcy Court for the:	DISTRICT OF SOUTH	I CAROLINA							
Case number (if known)	•				eck if this is an ended filing					
	orm 106Dec ation About a	ın Individua	l Debtor's Sch	nedules	12/15					
obtaining mo years, or both	bu must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or btaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 ears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  Sign Below									
Did you	pay or agree to pay some	one who is NOT an atto	orney to help you fill out ba	nkruptcy forms?						
■ No										
☐ Yes	s. Name of person			Attach Bankruptcy Petition Declaration, and Signature						
	enalty of perjury, I declare vare true and correct.	that I have read the sur	mmary and schedules filed	with this declaration and						
X /s/ L	avona Charlene Mitche	sii	X							
	ona Charlene Mitchell		Signature of D	ebtor 2						
Sign	ature of Debtor 1									
Date	April 12, 2021		Date							

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Fill	in this inform	ation to identify you	r case:								
	otor 1										
Der	NOI I	Lavona Charlend	Middle Name	Last Name							
	otor 2 use if, filing)	First Name	Middle Name	Last Name							
		kruptcy Court for the:	DISTRICT OF SOUTH C	AROLINA							
(if kn	se number own)				_	Check if this is an mended filing					
Sta		of Financial	Affairs for Individ		ankruptcy equally responsible for sup	4/19					
info	rmation. If me		attach a separate sheet to		y additional pages, write you						
Par	t 1: Give D	etails About Your Ma	arital Status and Where You	Lived Before							
1.	What is your	current marital statu	ıs?								
	<ul><li>□ Married</li><li>■ Not marr</li></ul>	ried									
2.	During the la	uring the last 3 years, have you lived anywhere other than where you live now?									
	<ul> <li>■ No</li> <li>□ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.</li> </ul>										
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there					
					ity property state or territory						
	■ No □ Yes. Mal	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).							
Par	t 2 Explain	n the Sources of You	r Income								
4.	Fill in the total	I amount of income yo	nployment or from operating u received from all jobs and a have income that you receive	all businesses, including part		ndar years?					
	<ul><li>□ No</li><li>■ Yes. Fill</li></ul>	in the details.									
			Debtor 1		Debtor 2						
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)					
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$1,355.21	☐ Wages, commissions, bonuses, tips						
			☐ Operating a business		☐ Operating a business						

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Debtor 1 Lavona Charlene Mitchell

	Debtor 1		Debtor 2		
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
	☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips		
	Operating a business		☐ Operating a business		
For last calendar year: (January 1 to December 31, 2020)	■ Wages, commissions, bonuses, tips	\$2,820.97	☐ Wages, commissions, bonuses, tips		
	☐ Operating a business		☐ Operating a business		
	☐ Wages, commissions, bonuses, tips	\$14,263.00	☐ Wages, commissions, bonuses, tips		
	Operating a business		☐ Operating a business		
For the calendar year before that: (January 1 to December 31, 2019 )	■ Wages, commissions, bonuses, tips \$1,053.00		☐ Wages, commissions, bonuses, tips		
	☐ Operating a business		☐ Operating a business		
	☐ Wages, commissions, bonuses, tips	\$12,200.00	☐ Wages, commissions, bonuses, tips		
	Operating a business		☐ Operating a business		
<ul> <li>Did you receive any other income Include income regardless of wheth and other public benefit payments; winnings. If you are filing a joint cas List each source and the gross incoming.</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>	ner that income is taxable. Exa pensions; rental income; inter- se and you have income that y ome from each source separat	imples of other income are all est; dividends; money collect ou received together, list it of	ed from lawsuits; royalties; an nly once under Debtor 1.  at you listed in line 4.		
	Debtor 1 Sources of income	Gross income from	Debtor 2	Gross income	
	Describe below.	each source (before deductions and exclusions)	Sources of income Describe below.	(before deductions and exclusions)	
From January 1 of current year until the date you filed for bankruptcy:	Stimulus Check	\$4,600.00			
	Unemployment	\$3,445.00			
For last calendar year: (January 1 to December 31, 2020)	Unemployment	\$2,290.00			
For the calendar year before that: (January 1 to December 31, 2019)	No Unemployment Benefits	\$0.00			

Case 21-01020-dd Doc 1 Filed 04/12/21 Entered 04/12/21 15:14:44 Page 46 of 73 Document Debtor 1 Lavona Charlene Mitchell Case number (if known) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825\* or more?  $\square$  No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,825\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address **Dates of payment Total amount** Amount you Was this payment for ... still owe paid Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Amount you Insider's Name and Address Reason for this payment **Dates of payment** Total amount paid still owe **Crystal Green** March 2021 \$1,300.00 \$0.00 Ms. Mitchell borrowed 790 Greenwood Street money from her sister in March 2020 when Simply Summerville, SC 29485 Tasteful started to decline in order to pay for household bill and expenses. She repaid her sister with funds from her tax refund. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Nο Yes. List all payments to an insider **Insider's Name and Address** Dates of payment Total amount Amount you Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

Nature of the case

Court or agency

Yes. Fill in the details.

Case title

Case number

Status of the case

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Debtor 1 Lavona Charlene Mitchell

	Case title Case number	Nature of the case	Court or agency		Status of th	e case
	Onemain Financial Group Llc vs Lavona Mitchell 2020CP1000489	Debt Collection	Charleston County Cour Common Pleas 100 Broad Street Ste 106 Charleston, SC 29401		☐ Pending ☐ On appe ☐ Conclude	
			,		Judgment \$8,612.22	for the Plaintiff
	LVNV Funding, LLC vs Lavona Mitchell 2020CV1010600923	Debt Collection	Charleston County Cour Common Pleas 100 Broad Street Ste 106		☐ Pending ☐ On appe ☐ Conclude	
	Charleston, SC 29401				t for the Plaintiff	
	Midland Credit Management LLC vs Lavona Mitchell 2020CP1003896	Debt Collection	Charleston County Cour Common Pleas 100 Broad Street Ste 106		☐ On appeal	
	Charleston, SC 29401				Judgment \$4,956.21	for the Plaintiff
	Terrance L. Waters vs Lavona Mitchell and Geechie Grub, LLC and John Doe 2018CP1005893	Civil	Charleston County Cour Common Pleas 100 Broad Street Ste 100 Charleston, SC 29401		Pending On appe Conclude	
	Republic Finance vs. Lavona Mitchell 2018CP1003260	Debt Collection	Charleston County Cour Common Pleas 100 Broad Street Ste 106		☐ Pending ☐ On appeal ■ Concluded	
		Charleston, SC 29401				for the Plaintiff
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below		erty repossessed, foreclosed,	garnis	hed, attached	I, seized, or levied?
	■ No. Go to line 11. □ Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property  Explain what happened	i	Date		Value of the property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment becomes No □ Yes. Fill in the details.		luding a bank or financial inst	itution	, set off any a	mounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date a	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a  No Yes		erty in the possession of an a			fit of creditors, a

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Deb	otor 1 Lavona Charlene Mitchell	[	Document Page 48 of 73  Case numb	Der (if known)	- Wall			
Part	t 5: List Certain Gifts and Contributio	ns						
13.	Within 2 years before you filed for bank  ■ No □ Yes. Fill in the details for each gift.	ruptcy, d	lid you give any gifts with a total value of mor	re than \$600 per person?	,			
	Gifts with a total value of more than \$6 per person  Person to Whom You Gave the Gift and		Describe the gifts	Dates you gave the gifts	Value			
14.	Address:  Within 2 years before you filed for bank  ■ No □ Yes. Fill in the details for each gift or		did you give any gifts or contributions with a t	total value of more than	\$600 to any charity?			
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo	total	Describe what you contributed	Dates you contributed	Value			
Part	t 6: List Certain Losses							
	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster or gambling?							
	■ No							
	<ul> <li>Yes. Fill in the details.</li> <li>Describe the property you lost and how the loss occurred</li> </ul>	Include	be any insurance coverage for the loss the amount that insurance has paid. List pendin the claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost			
Part	t 7: List Certain Payments or Transfel							
	Within 1 year before you filed for bankruconsulted about seeking bankruptcy or	uptcy, di preparii	d you or anyone else acting on your behalf pang a bankruptcy petition? s, or credit counseling agencies for services requ		ty to anyone you			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You		Description and value of any property transferred	Date payment or transfer was made	Amount of payment			
	Meredith Law Firm, LLC 4000 Faber Place Drive Suite 120 North Charleston, SC 29405		Filing Fee \$338.00 Attorney's Fee \$1,725.00 Credit Report \$37.00	December 2020	\$2,100.00			

Debtor

Ste. 26001 Dows, IA 50071

Debtor

Access Counseling, Inc.

633 W. 5th Street

Credit Counseling \$23.85

\$23.85

December 6,

2020

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Debtor 1 Lavona Charlene Mitchell

17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16.									
	Yes. Fill in the details.  Person Who Was Paid  Address	Description and va	alue of any prope	rty Date payme or transfer v made						
18.	Within 2 years before you filed for bankrupto transferred in the ordinary course of your but Include both outright transfers and transfers mainclude gifts and transfers that you have already  No  Yes. Fill in the details.	usiness or financial affa ade as security (such as the	irs? ne granting of a sec							
	Person Who Received Transfer Address Person's relationship to you	Description and vo		Describe any property of payments received or dipaid in exchange						
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro ■ No □ Yes. Fill in the details.		y property to a se	lf-settled trust or similar o	device of which you are a					
	Name of trust Description and value of the property transferred									
-	8: List of Certain Financial Accounts, Ins	•	·							
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, assoc No Yes. Fill in the details.	r other financial accoun	ts; certificates of	•	•					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	or Date account wa closed, sold, moved, or transferred	before closing or transfer					
21.	Do you now have, or did you have within 1 y cash, or other valuables?  No Yes. Fill in the details.	vear before you filed for	bankruptcy, any s	safe deposit box or other	depository for securities,					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acco Address (Number, St State and ZIP Code)		escribe the contents	Do you still have it?					
22.	Have you stored property in a storage unit o  ■ No ■ Yes. Fill in the details.	or place other than your	home within 1 ye	ar before you filed for bar	nkruptcy?					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		escribe the contents	Do you still have it?					

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Debtor 1 Lavona Charlene Mitchell

	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?						
	U-haul Moving and Storage 8222 Dorchester Rd. North Charleston, SC 29418	Lavona Charlene Mitchell 1908 Alton St. Charleston, SC 29406	Restaraunt equipment and supplies (Total FMV \$1,375) (These items were used for the operations of Geechie Grub, LLC. They have not been accessed since the start of the lawsuit. Ms. Mitchell pays the \$216 storage fee each month.)	□ No ■ Yes						
Par	t 9: Identify Property You Hold or Control for	Someone Else								
	Do you hold or control any property that some for someone.	one else owns? Include any proper	ty you borrowed from, are storing fo	r, or hold in trust						
	■ No □ Yes. Fill in the details.									
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value						
Par	t 10: Give Details About Environmental Inform	ation								
For	the purpose of Part 10, the following definitions	apply:								
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.									
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.									
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		waste, hazardous substance, toxic	substance,						
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of wher	they occurred.							
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	under or in violation of an environm	ental law?						
	■ No □ Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice						
25.	Have you notified any governmental unit of any	release of hazardous material?								
	■ No □ Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice						
26.	Have you been a party in any judicial or admini	strative proceeding under any envi	ronmental law? Include settlements	and orders.						
	■ No □ Yes. Fill in the details.									
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case						

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Debtor 1 Lavona Charlene Mitchell

Pai	t 11	Give Details About Your Business or	Connections to Any Business							
27.	Wit	hin 4 years before you filed for bankrupt	cy, did you own a business or have any of	the followi	ng connections to any business?					
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time									
		■ A member of a limited liability comp	any (LLC) or limited liability partnership (L	LP)						
		☐ A partner in a partnership								
		☐ An officer, director, or managing exc	ecutive of a corporation							
		☐ An owner of at least 5% of the voting	g or equity securities of a corporation							
		No. None of the above applies. Go to F								
			in the details below for each business.							
	Bu	isiness Name	Describe the nature of the business	Employer	Identification number					
		Idress Imber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not inc	clude Social Security number or ITIN.					
			rame of accountant of bookkeeper	Dates bus	siness existed					
		mply Tasteful, LLC	Catering	EIN:	85-0792123					
		08 Alton St. narleston, SC 29406	(The debtor operated this catering business on and off since 2011. The LLC remains open but the debtor has not operated this business since March 2020 due to COVID-19.)	From-To	2011 - Present					
			N/A							
	19	eechie Grub, LLC. 108 Alton St. narleston, SC 29406	Restaurant (Ms. Mitchell and Terrance L. Waters owned and operated this	EIN: From-To	81-3519119 7/29/2016- 7/2018					
		, and the second	restaurant until a decline in their personal relationship left them unable to continue to operate the business together. All remaining assets (FMV \$1,375) are in storage.)							
			N/A							
28.		thin 2 years before you filed for bankrupt titutions, creditors, or other parties. No Yes. Fill in the details below.	cy, did you give a financial statement to an	yone abou	t your business? Include all financial					
		ime Idress	Date Issued							
		unber, Street, City, State and ZIP Code)								
Pa	t 12	Sign Below								
are with	rue a b	and correct. I understand that making a	ancial Affairs and any attachments, and I d false statement, concealing property, or ob \$250,000, or imprisonment for up to 20 year	taining mo	oney or property by fraud in connection					
La	on:	rona Charlene Mitchell a Charlene Mitchell ure of Debtor 1	Signature of Debtor 2							
Da	е	April 12, 2021	Date							
Did	you	attach additional pages to Your Stateme	ent of Financial Affairs for Individuals Filing	for Bankrı	uptcy (Official Form 107)?					

Debtor 1 Lavona Charlene Mitchell

No
Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform	nation to identify your	case:		
Debtor 1	Lavona Charlene	Mitchell		
Dobtor 2	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	DISTRICT OF SC	OUTH CAROLINA	
Casa number				
Case number (if known)				☐ Check if this is an amended filing
Official Fo	rm 108			
Statemer	nt of Intentio	n for Indiv	viduals Filing Under Chapte	er 7 12/15
If you are an indi	vidual filing under cha	pter 7, you must fil	ll out this form if:	
■ creditors have	e claims secured by yo	ur property, or		
You must file this	ver is earlier, unless th	ithin 30 days after	ot expired. you file your bankruptcy petition or by the date se e time for cause. You must also send copies to the	, , , , , , , , , , , , , , , , , , ,
	ople are filing togethe	r in a joint case, bo	oth are equally responsible for supplying correct in	formation. Both debtors must
	and accurate as possib our name and case nur		s needed, attach a separate sheet to this form. On t	he top of any additional pages,
Part 1: List Yo	our Creditors Who Hav	e Secured Claims		
			c Creditors Who Have Claims Secured by Property	(Official Form 106D) fill in the
information be	low.			
Identify the cre	editor and the property t	hat is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's L'	VNV Funding, LLC		Surrender the property.	□ No
name.			☐ Retain the property and redeem it. ☐ Retain the property and enter into a	■ Yes
	1908 Alton St. Cha		Reaffirmation Agreement.	
property securing debt:	29406 Charleston TMS#472-16-00-03		■ Retain the property and [explain]: avoid lien using 11 U.S.C. § 522(f)	
securing debt.			avoid lieff using 11 0.3.C. § 322(I)	_
Creditor's M	lidland Credit Manag	nement	Course and as the property	□ No
name:	ilalana Orean Manag	gement	☐ Surrender the property. ☐ Retain the property and redeem it.	□ NO
<b>5</b>	4000 411 01 01		☐ Retain the property and enter into a	Yes
Description of property	1908 Alton St. Cha 29406 Charleston		Reaffirmation Agreement.	
securing debt:	TMS#472-16-00-03	•	■ Retain the property and [explain]: avoid lien using 11 U.S.C. § 522(f)	_
Creditor's O	neMain Financial		☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	-
Description of	1908 Alton St. Cha	urleston SC	Retain the property and enter into a	Yes
property	29406 Charleston TMS#472-16-00-03	County	Reaffirmation Agreement.  Retain the property and [explain]:	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Lavona Charlene Mitchell	Case number (if known)				
securing debt:	avoid lien using 11 U.S.C. § 522(f)				
Creditor's Republic Finance name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No			
Description of property 1908 Alton St. Charleston, SC 29406 Charleston County	<ul><li>□ Retain the property and enter into a Reaffirmation Agreement.</li><li>■ Retain the property and [explain]:</li></ul>	■ Yes			
securing debt: TMS#472-16-00-030	avoid lien using 11 U.S.C. § 522(f)				
Creditor's USAA Federal Savings Bank	Surrender the property.	□ No			
Description of Certificate of Deposit: USAA CD	<ul><li>☐ Retain the property and redeem it.</li><li>☐ Retain the property and enter into a Reaffirmation Agreement.</li></ul>	■ Yes			
property Acct: #5077 securing debt: (Secures USAA Credit Card Acct #2503)	☐ Retain the property and [explain]:				
Part 2: List Your Unexpired Personal Property Leases					
For any unexpired personal property lease that you listed in the information below. Do not list real estate leases. Ur You may assume an unexpired personal property lease if	nexpired leases are leases that are still in effect	; the lease period has not yet ended.			
Describe your unexpired personal property leases		Will the lease be assumed?			
Lessor's name:		□ No			
Description of leased					
Property:		☐ Yes			
Lessor's name: Description of leased		□ No			
Property:		☐ Yes			
Lessor's name:		□ No			
Description of leased Property:		□ Yes			
Lessor's name: Description of leased		□ No			
Property:		☐ Yes			
Lessor's name:		□ No			
Description of leased Property:		☐ Yes			
Lessor's name:		□ No			
Description of leased					
Property:		☐ Yes			
Lessor's name: Description of leased		□ No			
Property:		☐ Yes			
Part 3: Sign Below					

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal

Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7

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Del	otor 1 L	avona Charlene Mitchell	Case number (if known)	
pro	perty tha	t is subject to an unexpired lease.		
X	/s/ Lav	ona Charlene Mitchell	X	
	Lavon	a Charlene Mitchell	Signature of Debtor 2	
	Signatu	re of Debtor 1		
	Date	April 12, 2021	Date	

# 

Fill in this infe	ormation to identify your case:					irected in this form and	d in Form
Debtor 1	Lavona Charlene Mitchell		122	2A-1Supp	):		
Debtor 2 (Spouse, if filing)				■ 1. The	re is no pres	umption of abuse	
	s Bankruptcy Court for the: District of South C	arolina		app	olies will be n	o determine if a presunade under <i>Chapter 7</i> icial Form 122A-2).	•
Case numbe	rr		_	☐ 3. The	Means Test	does not apply now by service but it could a	
				☐ Chec	k if this is a	n amended filing	
Official	Form 122A - 1						
Chapte	r 7 Statement of Your Cur	rent Mor	nthly Inc	ome			04/20
attach a separ case number ( qualifying mili	e and accurate as possible. If two married people a ate sheet to this form. Include the line number to w if known). If you believe that you are exempted fro tary service, complete and file Statement of Exemp Calculate Your Current Monthly Income	hich the additior m a presumption	nal information a of abuse becau	applies. O	n the top of a not have prir	ny additional pages, wri	te your name and or because of
1. What is	s your marital and filing status? Check one or	ıly.					
■ Not	married. Fill out Column A, lines 2-11.						
☐ Marı	ried and your spouse is filing with you. Fill ou	ıt both Columns	A and B, lines	2-11.			
☐ Marı	ried and your spouse is NOT filing with you.	You and your s	spouse are:				
Li	ving in the same household and are not lega	Ily separated.	Fill out both Co	lumns A a	and B, lines 2	2-11.	
р	ving separately or are legally separated. Fill enalty of perjury that you and your spouse are leving apart for reasons that do not include evadir	egally separated	d under nonban	kruptcy la	aw that appli	es or that you and you	
101(10A). F the 6 month	average monthly income that you received from all for example, if you are filing on September 15, the 6-m is, add the income for all 6 months and divide the total on the same rental property, put the income from that p	onth period would by 6. Fill in the res	be March 1 throusult. Do not include	ugh Augus de any inco	t 31. If the amo	ount of your monthly incor ore than once. For examp	me varied during ple, if both
				Column Debtor		Column B Debtor 2 or non-filing spouse	
_	ross wages, salary, tips, bonuses, overtime, deductions).	and commission	ons (before all	\$	584.75	\$	
	y and maintenance payments. Do not include B is filled in.	payments from	a spouse if	\$	0.00	\$	
of you from an and roo	ounts from any source which are regularly pa or your dependents, including child support unmarried partner, members of your household mmates. Include regular contributions from a sp	. Include regular d, your depende	contributions nts, parents,	\$	0.07	\$	
	Do not include payments you listed on line 3. ome from operating a business, profession,	or farm		Ψ		Ψ	
0. <b>1101</b> III0	ome from operating a business, profession,		otor 1				
Gross r	eceipts (before all deductions)	\$ 0.00					
Ordinar	y and necessary operating expenses	-\$ 0.00					
Net mo	nthly income from a business, profession, or far	n \$ <b>0.00</b>	Copy here ->	\$	0.00	\$	
6. Net inc	ome from rental and other real property						
_			otor 1				
	eceipts (before all deductions)	\$ <u>0.00</u> -\$ <u>0.00</u>					
	y and necessary operating expenses	· -	Copy here ->	\$	0.00	\$	
	nthly income from rental or other real property	\$	John Heie ->		0.00	\$	
7. Interes	t, dividends, and royalties			\$	5.00	•	

Official Form 122A-1

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Lavona Charlene Mitchell Debtor 1 Case number (if known)

									Column A Debtor 1			Del	lumn B btor 2 o n-filing	r spouse		
8.	Unemp	ployn	nent comper	sation				5	<b>B</b>	91	18.50	\$	_	•		
	Do not	ente	r the amount			t received was a be	enefit und	er				-			-	
	For	you <sub></sub>			\$	i	0.00									
	For	your	spouse		\$											
9.	benefit not incl United disabili pay pa does n	on or under lude a State ity, or id und ot exc	retirement in er the Social Sany compenses Government death of a moder chapter 6 ceed the amo	ncome. Do not in Security Act. Also ation, pension, p nt in connection v ember of the unit 1 of title 10, then ount of retired pay	nclude any and	nount received that tated in the next se or allowance paid by ty, combat-related tes. If you received pay only to the extension would otherwise but ter 61 of that title.	entence, d y the injury or any retire ent that it	ed	\$		0.00	\$				
10.	Do not under t under t corona crime, compe Govern death of	incluithe Feather National Including	de any benefiederal law relational Emergidisease 2019 me against huon pension, pension on the tin connectionember of the	its received under ating to the nation gencies Act (50 L D (COVID-19); par manity, or internation pay, annuity, or a n with a disability	er the Social s nal emergend J.S.C. 1601 e ayments recei ational or dor allowance paid , combat-rela	ecify the source and Security Act; payments of declared by the left seq.) with respectived as a victim of a mestic terrorism; or display the United Stated injury or disable sary, list other source.	ents made President t to the a war tes ility, or	)								
								5	\$		0.00	\$_				
								5	\$		0.00	\$_			_	
		Tot	tal amounts fr	om separate pag	ges, if any.			+ 5	\$		0.00	\$			_	
11.	each c	olumi	n. Then add tl		nn A to the to	nes 2 through 10 fo tal for Column B.	s	1,	503.32		<b>+</b> \$ _			Total	1,503.32	
12	Calcul	ato v	our current r	nonthly income	for the year	. Follow these step										
12.									_							
	12a. C	ору у	our total curre	ent monthly incor	me from line	11			Co	ру	line 11	nere=	:>	\$	1,503.32	<u>!</u>
			,	umber of months	• ,									X	12	
	12b. Th	he res	sult is your an	inual income for	this part of th	e form							12b	· \$	18,039.84	-
13	Calcul	ate ti	he median fa	mily income the	at applies to	you. Follow these	stens:									
				•	и арриос то	SC										
	riii iii u	HE SIG	ate in which y	ou live.		30										
	Fill in tl	he nu	ımber of peop	le in your housel	hold.	2										
	To find	l a list	t of applicable		amounts, go	of household. online using the lire		d in	the sepa	ırate	instruc	tions	13.	\$	64,874.00	
14.	. How d	o the	lines compa	are?												
	14a.	_	Line 12b is le	ess than or equa		n the top of page 1	, check be	ox 1	, There is	s no	presun	nption	of abus	e.		
	14b.		Line 12b is n	Do NOT fill out nore than line 13 and fill out Form	. On the top of	Form 122A-2. of page 1, check bo	ox 2, The p	ores	umption	of a	buse is	deter	mined b	y Form	122A-2.	
Part	t 3:	Sign	Below		. <b></b>											
				eclare under pena	alty of perjury	that the informatio	n on this	state	ement and	d in	any att	achm	ents is t	rue and	correct.	
		_									•					
	X		∟avona Cna ona Charle	ırlene Mitchell ne Mitchell	<u> </u>											
		_u v	Jila Jilaile				_									_

# 

Debtor 1	Lavona Charlene Mitchell	Case number (if known)	
	Signature of Debtor 1		
Da	April 12, 2021 MM / DD / YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form	m.	

Case number (if known)

### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 10/01/2020 to 03/31/2021.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Employer: Charleston Stevedoring Compan

Constant income of \$253.33 per month.\*

#### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Employer: Marine Terminals Corporation

Constant income of \$331.42 per month.\*

#### Line 4 - Child support income (including foster care and disability)

Source of Income: Child Support

Income by Month:

6 Months Ago:	10/2020	\$0.40
5 Months Ago:	11/2020	\$0.00
4 Months Ago:	12/2020	\$0.00
3 Months Ago:	01/2021	\$0.00
2 Months Ago:	02/2021	\$0.00
Last Month:	03/2021	\$0.00
	Average per month:	\$0.07

#### Remarks:

Ms. Mitchell received the last disbursement of child support back pay in October 2020. She will not receive any more income from this source.

#### Line 8 - Unemployment compensation (included in CMI)

Source of Income: South Carolina Unemployment

Income by Month:

6 Months Ago:	10/2020	\$524.00
5 Months Ago:	11/2020	\$587.00
4 Months Ago:	12/2020	\$524.00
3 Months Ago:	01/2021	\$1,721.00
2 Months Ago:	02/2021	\$1,724.00
Last Month:	03/2021	\$431.00
	Average per month:	\$918.50

#### Remarks

Ms. Mitchell started receiving unemployment benefits in late August 2020. She received her last benefit payment on March 1, 2021.

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Lavona Charlene Mitchell Debtor 1 Case number (if known)

### \*Paycheck Details:

### **Marine Terminals Corporation - East**

Date	Earnings	Overtime	Taxes	Other	Net Check
2020-11-04	219.14	0.00	24.26	10.12	184.76
2020-11-10	302.83	0.00	42.64	14.55	245.64
2020-11-25	71.25	0.00	6.48	3.49	61.28
2020-12-09	282.79	0.00	37.69	13.34	231.76
2020-12-16	122.94	0.00	12.21	5.63	105.10
2020-12-30	274.35	0.00	35.61	12.89	225.85
2021-01-06	69.00	0.00	6.00	3.38	59.62
2021-02-03	197.28	0.00	20.91	9.28	167.09
2021-02-24	228.03	0.00	24.93	10.79	192.31
2021-03-03	220.90	0.00	23.94	10.51	186.45
Totals:	1,988.51	0.00	234.67	93.98	1,659.86

### **Charleston Stevedoring Company, LLC**

Date	Earnings	Overtime	Taxes	Other	Net Check
2020-11-10	410.00	0.00	69.05	19.46	321.49
2020-12-02	160.00	0.00	16.61	7.84	135.55
2020-12-09	310.00	0.00	44.39	14.74	250.87
2021-02-10	340.00	0.00	50.78	16.12	273.10
2021-03-17	300.00	0.00	40.92	13.80	245.28
Totals:	1,520.00	0.00	221.75	71.96	1,226.29

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7	<b>'</b> :	Liquidation
\$2	245	filing fee
\$	78	administrative fee
+ \$	15	trustee surcharge
\$3	338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses">http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses</a>.

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 21-01020-dd Doc 1 Filed 04/12/21 Entered 04/12/21 15:14:44 Desc Main Document Page 65 of 73

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**District of South Carolina

In re	Lavona Charlene Mitchell		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENS	SATION OF ATTO	RNEY FOR D	EBTOR(S)	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing of the rendered on behalf of the debtor(s) in contemplation of the debtor(s).	of the petition in bankruptcy	, or agreed to be paid	to me, for services rendered	or to
	For legal services, I have agreed to accept		\$	1,725.00	
	Prior to the filing of this statement I have received		\$	1,725.00	
	Balance Due		_	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compen	sation with any other person	unless they are men	bers and associates of my la	w firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name.				n. A
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
	<ul> <li>a. Analysis of the debtor's financial situation, and renderir</li> <li>b. Preparation and filing of any petition, schedules, statem</li> <li>c. Representation of the debtor at the meeting of creditors</li> <li>d. [Other provisions as needed]</li> <li>N/A</li> </ul>	ent of affairs and plan which	h may be required;		,
<b>6.</b>	By agreement with the debtor(s), the above-disclosed fee d  Defense or prosecution of adversary procesell an asset, 2004 examinations, defense the plan after confirmation and any other in	eedings, motions to mo of dischargeability action	dify the stay, audi ons and, in a chap	ter 13 case, modificatioı	
		CERTIFICATION			
	I certify that the foregoing is a complete statement of any a pankruptcy proceeding.	greement or arrangement for	r payment to me for	representation of the debtor(s	in
Α	pril 12, 2021	/s/ Elizabeth R. F	łeilig		
Date		Elizabeth R. Heilig 10704			
		Signature of Attorn Meredith Law Fir	•		
		4000 Faber Place	e Drive		
		Suite 120 North Charlestor	n. SC 29405		
		843-529-9000 Fa	ax: 843-529-9907		
		eheilig@meredit  Name of law firm	hlawfirm.com		
		manic oj iaw jimi			

## MEREDITH LAW FIRM, LLC ATTORNEY RETAINER AGREEMENT

This agreement is made by and between Lavona C. Mitchell (hereinafter "Client") and Meredith Law Firm, LLC (hereinafter "Attorney"). Client hereby retains and employs said Attorney to represent Client in the following matter:

Filing a consumer liquidation under Chapter 7 of the Bankruptcy Code and related papers.

- 1. This agreement is solely in respect to the above-referenced matter. It shall include the evaluation of the case, the preparation of the petition, schedules and statements required by the court and attendance at the Meeting of Creditors. All other matters are separate and apart from this agreement, including any subsequent or related appeal or defense on appeal. Unanticipated actions including adversary proceedings, contested matters, audits and appeals are not part of this attorney retainer agreement and will result in an additional charge. If we later agree that this case should be under a different chapter of the Bankruptcy Code the parties shall execute a new agreement setting forth the terms of such representation.
- Client empowers and authorizes Attorney to take all legal actions and provide all legal services deemed necessary and advisable by attorney in this matter. Attorney may associate other counsel as he deems necessary unless otherwise agreed in writing.
- 3. It is agreed that the attorney's fee in this matter shall be computed as follows:
  - a. The base fee due to Attorney is \$2,100.00. This includes the filing fee of \$338.00 and a credit report fee of \$37.00. This amount is due in full prior to filing a case with the Bankruptcy Court.
  - b. This fee is based upon the following mutually agreed-upon conditions:
    - (1) Client agrees to provide Attorney with accurate and complete information regarding Client's debts, assets and any other information relevant to the case in a timely manner prior to the filing of this case;
    - (2) Attorney does not in any way guarantee the accuracy of the information obtained from any credit report and Client understands that it is Client's duty to convey the necessary information and documentation to properly prepare Client's case. Client understands and acknowledges that the use of a credit report should never be the exclusive source for information regarding Client's debts.
    - (3) Client understands and agrees that court online records may not be accurate as to pending actions or filed pleadings or judgments and agrees to keep Attorney fully informed of any pending actions, judgments or confessions of judgments. Client understands and agrees that failure to bring such information to Attorney's attention or to review court documents filed by Attorney on Client's behalf could result in the omission of this important information and the retention of potential judgment liens.
    - (4) Client will keep Attorney advised at all times of the Client's current mailing address and telephone numbers.
    - (5) Client acknowledges and understands that all payments made to Attorney must be in cash or by certified funds. Personal checks, credit or debit cards will not be accepted in any situation.

- (6) Client will pay this fee in a reasonable amount of time and promises to pay some portion of the fee during each calendar month until the fee is paid in full. Failure to make a partial payment during a successive calendar month may result in Attorney's withdrawal from further representation. Attorney may charge additional fees for cases not filed within ninety (90) days of retainer as a result of duplicate work required by the passage of time. Unless specifically agreed otherwise, Attorney will charge an additional \$300.00 for any case that is not prepared and filed within ninety (90) days from the signing of this retainer agreement.
- c. Upon the execution of this agreement Client shall pay no less than \$300.00 as an initial retainer fee. This amount is earned upon receipt and is not refundable. Client understands that the case will not be filed with the court until the entire retainer fee is paid and the necessary documents are reviewed and signed by Client.
- 4. It is understood that in some cases additional work may be required in the case that was not contemplated by the parties or expressly agreed to at the time of entering into this agreement between the attorney and client. Such services include, but are not limited to, adversary actions, addition of a creditor after the petition and schedules have been filed, audits, unanticipated travel outside the greater Charleston area, defense of dischargeablility actions, defense of motions to modify the automatic stay, defense of petitions to dismiss case, 2004 examinations and any further action required after the Section 341 hearing. Attorney shall bill said client at a flat fee rate (generally no less than \$500.00 per motion) or based upon an hourly rate of no less than \$350.00 per hour for attorneys and \$175.00 per hour for paralegals/staff depending upon the circumstances of the case. These attorney's fees and the manner of calculation will vary depending upon the action required. In the event that additional work is necessary, Client agrees to pay such additional fee to Attorney for work performed or to be performed. If such payment is to be installments, Client agrees to remit such installments in the manner explained above.
- 5. It is understood that in the event of litigation, heavily contested motions or heavily contested objections attorney may incur unanticipated costs and expenses in this matter. If such costs are incurred, Client hereby agrees to pay these costs immediately upon presentation. A non-exclusive list of potential costs are: filing fees, costs for depositions and court reporters, witness compensation, investigators, expert witnesses, long distance calls, copy charges, federal express or overnight postage, mileage for trips outside Charleston, faxes, subpoenas, photos, etc.
- 6. Attorney may incur additional costs during the case including, but not limited to, postage or service of document fees. Client agrees to reimburse Attorney for these costs on presentment.
- 7. Client may discharge attorney at any time by written notice. Attorney shall be entitled to all fees earned and costs incurred to that date in this matter notwithstanding said discharge by the client. Attorney's fees will be based upon the hourly rates indicated in paragraph 4 above as well as any costs incurred on Client's behalf. Should Client desire a copy of Attorney's file, payment of fees and costs shall be made before Attorney's release of said file.
- 8. It is understood and agreed that Attorney shall maintain a copy of Client's file for no greater than one year after the discharge or dismissal of this case. Attorney and Client agree that the file may be destroyed in a reasonable manner after the period of one year from the discharge or dismissal of the case. Client will receive one copy of the petition and schedules filed in this case. If Client requires another copy of the file or any document therein Client understands that there will be an additional charge for retrieving the Client's records and copying the necessary documents.
- 9. Attorney may, in his absolute discretion, withdraw from representing client in this matter at any time upon written notice to client. Client agrees to sign a substitution form if required.
- 10. An account is past due and shall immediately become due and owing in full when payment on account is not paid

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within fifteen (15) days of billing. Attorney shall be entitled to reasonable attorney's fees and costs for the collection of any past due account. If more than one client has signed this agreement, each client agrees to be jointly and severally liable for payment of all fees, costs or other charges.

- 11. Client understands and agrees that Attorney will represent Client to the best of his ability, but Attorney does not guarantee or promise a specific result to Client regarding the outcome of this matter.
- 12. I have read the above attorney retainer agreement and understand its terms fully. I acknowledge that there are no other agreements, verbal or otherwise, between Client and Attorney. By my signature below I agree to be bound by its terms.

DATED: 12-7-20

LAVONA CHARLENE MITCHELL

Pursuant to 11 U.S.C. Sections 101(12A) and 528 Meredith Law Firm, LLC is a debt relief agency. We help people file for bankruptcy relief under the Bankruptcy Code.

### LOCAL OFFICIAL FORM 1007-1(b) TO SC LBR 1007-1

# **United States Bankruptcy Court**District of South Carolina

In re Lav	vona Charlene Mitchell		Case No.	
		Debtor(s)	Chapter	7
	CERTI	FICATION VERIFYING CRE	DITOR MATRIX	
Bankruptcy CM/ECF, or	Rule 1007-1 that the mass r conventionally filed in a	attorney for the debtor if applicable, ter mailing list of creditors submitted typed hard copy scannable format watements and lists which are being filed	either on computer di hich has been compa	skette, electronically filed via red to, and contains identical
Ma	ster mailing list of creditors	submitted via:		
	(a) comput	er diskette		
	(b) scannal (number of sheets sub	ole hard copy mitted)		
	(c) X electronic	version filed via CM/ECF		
Date: Apr	il 12, 2021	/s/ Lavona Charlene Mito	chell	
		Lavona Charlene Mitche	II	_
		Signature of Debtor		
Date: Apr	il 12, 2021	/s/ Elizabeth R. Heilig		
		Signature of Attorney		
		Elizabeth R. Heilig 10704	<b>,</b>	
		Meredith Law Firm, LLC 4000 Faber Place Drive		
		Suite 120		
		North Charleston, SC 29	405	
		843-529-9000 Fax: 843-		
		Typed/Printed Name/Add	ress/Telephone	

10704 SC

District Court I.D. Number

BELK/SYNCHRONY BANK P.O. BOX 530940 ATLANTA GA 30353

BLEEKER BRODEY & ANDREWS P.O. BOX 90260 INDIANAPOLIS IN 46290

BON SECOURS ST. FRANCIS HOSPITAL PO BOX 650292 DALLAS TX 75265-0292

C. BRANDON BELGER, ESQ. 1058 EAST MONTAGUE AVE NORTH CHARLESTON SC 29405

C.O. FEDERAL CREDIT UNION 117 SPRING STREET, #C CHARLESTON SC 29403

CAPITAL ONE ATTN: BANKRUPTCY PO BOX 30285 SALT LAKE CITY UT 84130

CHRISTOPHER J. NEESON ESQ. P.O. BOX 90260 INDIANAPOLIS IN 46290

CLARKSON AND HALE, LLC 1044 WILDWOOD CENTRE DRIVE COLUMBIA SC 29202

EASTERN ACCOUNT SYSTEM, INC. ATTN: BANKRUPTCY PO BOX 837 NEWTOWN CT 06470

FOREST RECOVERY SERVICE PO BOX 83 BARRINGTON IL 60011 INTERNAL REVENUE SERVICE CENTRALIZED INSOLVENCY OPERATIONS PO BOX 7346 PHILADELPHIA PA 19101-7346

JEFFERSON CAPITAL SYSTEMS, LLC 16 MCLELAND RD. SAINT CLOUD MN 56303

KEVIN K. CORLEY ESQ. P.O. BOX 287 COLUMBIA SC 29202

KOONTZ MLYNARCZYK, LLC 1058 EAST MONTAGUE AVE. NORTH CHARLESTON SC 29405

LVNV FUNDING, LLC PO BOX 10497 GREENVILLE SC 29603

MICHAEL A. WHITSITT ESQ. 1476 BEN SAWYER BLVD., SUITE 3 MOUNT PLEASANT SC 29464

MICHAEL B. TRAVIS ESQ. 1744 SAM RITTENBURG BLVD. STE. D CHARLESTON SC 29407

MIDLAND CREDIT MANAGEMENT 350 CAMINO DE LA REINA SUITE 100 SAN DIEGO CA 92108

MIDLAND FUNDING LLC 350 CAMINO DE LA REINA, SUITE 100 SAN DIEGO CA 92108

NANCY C. FENNELL ESQ. P.O. BOX 2176 IRMO SC 29063

NAVIENT PO BOX 9500 WILKES BARRE PA 18773 NAVY FEDERAL CREDIT UNION ATTN: BANKRUPTCY PO BOX 3000 MERRIFIELD VA 22119

ONEMAIN FINANCIAL ATTN: BANKRUPTCY PO BOX 3251 EVANSVILLE IN 47731

PALMETTO PRIMARY CARE 201 SIGMA DRIVE STE 100 SUMMERVILLE SC 29486-7722

PORTFOLIO RECOVERY ASSOCIATES, LLC 120 CORPORATE BLVD NORFOLK VA 23502

REPUBLIC FINANCE 214 SAINT JAMES AVE STE GOOSE CREEK SC 29445

RESURGENT CAPITAL SERVICES PO BOX 1927 GREENVILLE SC 29602

ROPER RADIOLOGISTS PO BOX 2363 INDIANAPOLIS IN 46206-2363

SC DEPARTMENT OF REVENUE PO BOX 12265 COLUMBIA SC 29211

SCOTT & ASSOCIATES, PC 1744 SAM RITTENBERG BLVD, STE. D CHARLESTON SC 29407

SYNCHRONY BANK/PAYPAL PO BOX 965060 ORLANDO FL 32896 TERRANCE WATERS
C/O THE WHITSITT LAW FIRM
1476 BEN SAWYER BLVD.
MOUNT PLEASANT SC 29464

USAA 9800 FREDERICKBURG ROAD SAN ANTONIO TX 78288

USAA CREDIT CARD PAYMENTS 10750 MCDERMOTT FWY SAN ANTONIO TX 78288

USAA FEDERAL SAVINGS BANK ATTN: BANKRUPTCY 10750 MCDERMOTT FREEWAY SAN ANTONIO TX 78288